

BIBLIOGRAPHICAL NOTICES.

Summary of the Transactions of the College of Physicians of Philadelphia, from April 4 to August 1, 1848, inclusive.
A Descriptive Catalogue of Pictures, pastels, miniatures, &c., &c., made at the meetings, &c., of the American Medical Association, at Philadelphia, Pa. O. H. Corson, M. D. Published by O. H. Corson, 1848.

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NEW JERSEY MEDICAL REPORTER.

VOL. II. — TENTH MEETINGS.

NEW JERSEY MEDICAL SOCIETY.

A Semi-Annual Meeting of the New Jersey Medical Society will be held at Trenton, on the second Monday of November, ensuing, at 10 o'clock, A. M.

W. PARRISH, Rec. Secretary.

DISTRICT MEDICAL SOCIETY, FOR THE COUNTY OF MERCER.

A Quarterly Meeting for the District Medical Society, for the County of Mercer, will be held at Trenton, on the 24th, instant, at 10 o'clock, A. M.

JOHN H. PHILLIPS, Secretary.

DISTRICT MEDICAL SOCIETY, FOR THE COUNTY OF BURLINGTON.

A Semi-Annual Meeting of the District Medical Society, for the County of Burlington, will be held at the house of S. C. Stockton, Mount Holly, on 19th instant, at 10 o'clock, A. M.

JOSEPH PARRISH, Secretary.

ВЫИГРЫШ

NEW YORK MEDICAL SOCIETY.

A Good-Afternoon Message of the New Jersey Medical Society will be read at 10 o'clock at 7:30, on the second Monday of November, evening, at the Hotel New Yorker, New York City.

DISTRICT MEDICAL SOCIETY FOR THE COUNTY OF MERCE

A *Qassidatul Ma'rifat* for the *Deaf and Dumb Society*, for the *Deaf and Dumb Society*, will be held at *Deaf and Dumb Institute*, on the 24th instant, at 10 o'clock, A. M. *John H. Purtillo, Secretary.*

DISTRICT MEDICAL SOCIETY FOR THE COUNTY OF

BURLINGTON

THE NEW JERSEY MEDICAL REPORTER.

VOL. II. TENTH MONTH, (OCTOBER,) 1848. No. 1.

A DESULTORY INQUIRY

Into the different Effects arising from the operation of the same Causes. Read before the Medical Society of New Jersey, at its Annual Meeting, 1847;

BY CHARLES HANNAH, M.D., OF SALEM, N.J.

It is an assertion made ages ago, that like causes operating under similar circumstances, produce a sameness of effect; but vary the circumstances under which they operate, and the effects resulting from their action, will be greatly diversified.

The circumstances producing this difference of result, relate both to the agent or active matter, and to the patient or being acted upon. In order to illustrate the assertion I have made, I would observe, that Chemistry has taught us to believe that there are but few elementary or simple substances in nature; and that all the variety of our world arises from the different arrangement and combination of these few elementary or primary parts or principles, so I will venture to advance the opinion that there exist but few secondary or remote causes, and that all the diversified effects which take place in the material world arise from the operation of these few causes acting under different circumstances; that the same agent will facilitate composition or decomposition—that the same application may be made to produce pleasure or pain—that the same substances may be made remedial or poisonous, according to the quantity used, the mode in which it is given, or the state of the system at the time of its exhibition.

As farther proof of my position, I shall take the liberty of citing some of the different effects resulting from the operation of causes whose mode of action is familiar to us all.

Fire, which consists of heat or caloric and light, is under certain circumstances, useful to the Chemist, promoting the various combinations he wishes to accomplish, and facilitating the numerous experiments he wishes to perform. To the practical Pharmacist, it is essentially necessary, rendering more active his different menstrua, separating the more volatile from the more fixed parts of different substances, &c. In culinary purposes this agent is not to be dispensed with; and in most climates, in some seasons of the year, its presence is necessary to the comfortable existence of the human race, its artificial application compensating for the partial abstraction of natural heat. But in order that the effects mentioned should result from its operation, it is necessary that it should be entirely under the control of the operator, and be confined within the range of a very few degrees.

For example, a certain degree of heat is necessary to effect the combination of two volatile substances; subject the compound to a heat a few degrees greater, and you produce decomposition and evaporation. A certain degree of heat renders a spirituous menstruum more active; increase the heat a few degrees, and you produce volatilization and destroy its action altogether. A certain degree of heat is necessary to the preparation or dressing of any article of diet; subject it to a heat a few degrees greater, and it is rendered unfit to be eaten, and the application of a few additional degrees its decomposition or destruction. Place a person who has suffered but a short time and moderately from the abstraction of natural heat, at a comfortable distance from an artificial fire, and the effect is an agreeable warmth; lessen the distance, and the sensation becomes unpleasant, pain is the result, and by placing him still nearer, the excitability and organization of the system are destroyed.

Air, which consists of oxygen and nitrogen, so necessary to the existence of animals that perhaps none of the aerial, amphibious or even aquatic tribes of that kingdom exist without its use; and many of them cannot be deprived of it for more than a few seconds without injury; is passing constantly into and out of the lungs of all respiring animals, imparting its oxygen to the blood, from whence that fluid derives its heat and color. But it carries other matters into the system besides its own constituent parts.

Some of these I shall mention: Odours of various kinds, are by means of air, carried into the system, and produce upon it very important effects. Those that are agreeable and moderately stimulant contribute to produce that state of excitement which constitutes health. Those which rank under the title of strong exciting odours often arouse the system and produce resuscitation from a state of asphyxia and apparent death. But this fluid is not only capable of holding in solution and carrying into the system odours that produce pleasurable sensations and a healthy state of action, but also those whose effects are precisely the reverse. Ammoniacal gas, or the odour arising from substances undergoing the putrefactive fermentation produces one of the most unpleasant sensations imaginable. The miasma arising from the decomposition of vegetable substances—contagions, arising from different sources enter the lungs through the medium of the air, and implant in the system of man more of the destructive forms of disease than arise from any other quarter. Sounds,—all the pleasurable sensations we derive from music, from agreeable conversation, and every other description of sound, are conveyed through the medium of the air to the organ of hearing, and by producing a stimulant effect, tend, in many instances, to remove disease and prolong life—witness the happy effects of cheerful conversation and music upon the melancholy patient. Doleful sounds, on the contrary, and evil tidings, often add to the fatality of epidemics, by imparting to the system the re-active effects of fear, and depriving it of the salutary stimulus of hope. Not only so, but from a different proportion of its own component parts does the diversity of its effect arise. Atmospheric air of common purity consists of twenty-two parts of oxygen and seventy-eight parts of nitrogen, to the hundred. In this proportion it imparts oxygen enough to the system to produce the healthy state of excitement of body and mind. Increase the proportion of oxygen, as in nitrous oxide gas, you increase its stimulant power, and its respiration produces a high degree of excitement, manifested in various ways. Increase the oxygen still further, as in nitric oxide gas, compel an animal to respire it, you destroy excitement almost immediately from excess of stimulant force; he gasps a few times, becomes convulsive,

and dies. Reverse the proportion of oxygen and nitrogen, and the respiration becomes hurried; there is not oxygen enough imparted to the system to keep up due action, and nature pants for a purer atmosphere. One cubic inch of nitrogen gas introduced into the lungs of a healthy man, will produce speedy death; yet nitrogen gas is generated, exists as nitrogen gas, and acts as nitrogen gas in an organ in juxtaposition with the lungs. Here the difference is in structure and in function.

The air, when its parts are in just proportion, produces mischievous effects when it accidentally gains admission into any of the large cavities of the body, or into the cellular structure, a case of which I have lately seen, where, from a fracture of several ribs and one of the clavicles, the lungs were perforated by the sharp fragments of bone, the air escaped from the lungs and insinuated itself into the cellular substance, almost through its whole extent, and the unhappy sufferer exhibited a spectacle the most horrid.

Water, which consists of oxygen and hydrogen, enters largely into the composition of animals, forms the element in which many of them reside, enters in a great proportion into all their fluids, lubricates the different surfaces of cavities, preventing the adhesion of their sides or of contained viscera, giving that fluidity to the blood which is requisite to its easy transmission through its proper channels, gives that distension to many parts of the body which contributes to its proportion and comeliness, and renders the performance of many of its functions easy and regular.

When it enters the system generally, or any of its cavities in particular, in an over-abundant quantity, it produces effects entirely the reverse. It gives rise to deformity, by destroying the relative proportion of parts. It produces pain, by distending to excess, and gives rise to some of the most unmanageable kinds of disease with which the physician has to contend.

Blood, that vital fluid which is continually circulating through every part of the living body, conveying nourishment and heat to those which are most minute and most remote; which, when in due quantity, distends the vascular system precisely to that point which produces the pleasureable sensation which healthy animals enjoy. When it becomes excessive in quantity, distends the ves-

sels to excess, giving rise to pain, often producing the inflammatory state of fever, or rupturing the vessels of some important viscus, and producing immediate death from effusion.

Bile is a fluid of animal origin, furnished by the largest secretory organ in the human system, *sui generis* in its properties and qualities, whose presence and whose action are so necessary to digestion, chylification and assimilation, that neither process can go regularly and properly on without them both; and whose importance in the animal economy is so great, that none of the more perfect species of animals are found without its secretory gland, and its accompanying reservoir. This gland appears, moreover, to influence all the secretory glands in the system. Are the functions of the liver deranged and the bile vitiated? the urine, the saliva, the gastric secretion, and even the male semen, are vitiated. So true is the last assertion, that you will seldom see a man who suffers from chronic disease of the liver, beget healthy offspring.

In fact, when the biliary secretion is vitiated for a long time, all the states of disease in the class cachexia harass the unhappy patient. And when the bile becomes excessive in quantity, it forms an additional and very troublesome symptom in many forms of disease. This fact is probably known to the most ignorant of all the pretenders to the healing art—hence, all the *anti-bilious* pills, all the *anti-bilious* powders, all the *anti-bilious* potions of all the *anti-bilious* Quacks, from Dyott, the prince of the fraternity, to Jayne, Brandreth and Wright, who constitute the tail end of modern empiricism.

I shall now notice some of the artificial preparations which are used as medicines, and remark that the same articles may be rendered stimulant or sedative, emetic or cathartic, diuretic, sudorific, diaphoretic or expectorant, according as they are given in larger or smaller doses, and according to the management or state of the patient at the time of their exhibition.

Ardent spirit—this consists of alcohol, diluted with a greater or less proportion of water, and some other matters producing but little influence on its effect. Taken in moderate quantities it increases the action of the vital, natural and animal powers, produces a pleasurable state of mental excitement and renders the person happy. In typhus state of disease it is a very important remedy,

supporting the patient until we can derive advantage from the more durable articles of the tonic class of medicines. In dyspepsia and indigestion, its beneficial action on the stomach often removes the disease, and restores health. In all cases of direct debility, its action on the system is beneficial. Taken in excess, it prostrates the powers of body and mind, destroys digestion, produces dyspepsia and schirrrous liver, and a certain indescribable, insupportable state of body and mind, destroying the excitability of the system, from an excess of stimulant force.

Arsenious acid, the arsenic of the shops, consists of arsenic 75 parts, and oxygen 25 parts, to the 100. Taken in a very small quantity, and in a diluted state, it is one of the most powerful tonics we possess, often removing intermittent when the bark has failed, suspending or removing hectic fever, curing eruptions on the skin, strengthening the stomach, and through the medium of that organ imparting tone to the whole system.

Taken in excess, it destroys the stomach, produces violent spasms and pain, burning heat in the throat and on the skin, the most unquenchable thirst, and very certainly and very quickly destroys animal life.

Murias hydrargiri or oxymuriate of mercury, is composed of the metal highly oxidated and combined with a large proportion of muriatic acid. This is the most powerful of all mercurial preparations. A solution of this article used as an external wash, forms one of the best applications in venereal and other foul ulcers, disposing them to cleanse and put on a healthy state of action. Increase the strength of the solution, and you render its operation caustic and destructive, corroding the soft parts and perhaps destroying the bony structure. The diluted solution forms a very useful injection in gleet or gonorrhœa. Increase the strength of the solution and you produce strangury, inflammation of the prostate gland and coats of the bladder, and death ensues. Given in minute doses, it operates safely, favourably, and effectually in some forms of disease, particularly in the secondary state of syphilis. Given in large doses, it produces the same effect as the other metallic poisons.

Sub murias—hydrargiri, or mild muriate of mercury—the calomel of the shops, differs chemically from the former merely in the

metal being less highly oxidated, and in that oxide being combined with a less proportion of muriatic acid. And this is the most valuable of the mercurial preparations, and is susceptible of the widest application in the practice of our profession, and its mode of action may be very much varied by varying the mode of exhibition. Given in doses of 15 to 20 grains per se, it operates pretty certainly and effectually as a cathartic, and exerts an influence on the biliary system.

Given in doses of from 1 to 2 grains twice or thrice a day, it seldom affects the bowels, but acts with considerable certainty on the salivary glands, causing an increased secretion and excretion of saliva accompanied with an odour peculiarly mercurial. Continue its use still longer, and you produce ulcers of the soft parts, carry off the bones, and occasion a mercurial disease of the whole system, termed by writers eretheme. Given in minute doses, as from the tenth to the fifteenth of a grain, it seldom affects the mouth, but acts as an alterative and produces the most happy changes in many states of disease.

But the different antimonial preparations furnish us with some articles more directly in point. I shall mention but one. The tartrate of antimony, or tartar emetic of the shops. This article of the *materia medica* has of late been very extensively used in practice, but I shall merely state that, given in doses of from 3 to 10 grains, in solution, and in divided portions, it acts certainly and effectually as an emetic, producing all the beneficial effects that take place from full vomiting. Lessen the dose and instead of an inverted motion of the stomach, its natural action is increased, and this increased action is continued on through the intestinal canal, and purging takes place: lessen the dose again, and give it in divided portions exposing the surface of the body to the action of atmospheric air, it operates very certainly and powerfully as a diuretic—the same quantity given in the same way, only covering the skin so as to prevent the access of air to the skin, it determines powerfully to the surface, and becomes sudorific and diaphoretic. Given in nauseating doses, it but acts as an expectorant.

Thus far the difference of effect has related principally to the agent. I proceed to notice a few of those that relate to the pa-

tient or being acted upon, and confine myself to the animal system.

Dr. Brown says, "we do not know what excitability is, or in what manner it is acted upon by the exciting powers, but whatever it be, either a certain quantity or certain energy of it is assigned to every living being at the commencement of its living state."

The quantity or energy of it is different in different animals or in the same animal at different times. The excitability is a general principle pervading every part of the system, but is liable to become accumulated or exhausted, excessive or deficient from the excessive or deficient force of action of the powers calculated to destroy it, and the effect produced by the action of any article of diet or medicine, will be varied by the state of excitability at the time of its exhibition.

For example, one gill of spirits will produce a pleasant state of excitement in one person, a high state in another, and indirect debility in a third, while in another it will require two or three, or even eight gills to produce this effect. Ten grains of jalap with as much calomel will produce purging in one, while it requires twice or thrice as much to produce it in another. One grain of opium will carry one person to the sleep-inviting point of excitement, while a second will require two or three or four for the same purpose. Again, is the excitability of the system impaired or exhausted by the frequent application of stimulants, or from its excessive force—it requires from five to fifty per cent more strength in a medicine to produce action or excitement now, than at a former period. Here the agent is the same, applied in the same manner, and the difference of effect arises from the different state of the person acted on, and this diversity will be found to exist throughout all animal nature, and a perfect acquaintance with it is one of the most necessary and difficult acquirements the physician has to make.

This is a general principle and pervades the whole system, but there is also a principle of partial extent, which resides exclusively in particular organs. Blumenbach calls it *vita propria*; and Darwin, as it relates to the glands, calls it *glandular appetency*. I will merely mention this principle as it relates to some of the

secretory organs, enabling them to secrete from the same mass of blood, fluids so essentially different from each other in all their sensible qualities and uses as respects the animal system; the salivary glands secrete from the glands the salivary fluid which is nearly colourless and tasteless and an assistant in digestion. They also in general possess a disposition to have their secretory action remarkably increased by the mercurial stimulus, but this disposition is sometimes apparently absent, for I have given 480 grains of calomel in three months time to one patient, without producing ptyalism or soreness of the gums. In this case it operated most powerfully on the kidneys, and was the means of removing a most deplorable state of general dropsy—from the termination of this case in a permanent cure, I would think it most advisable to avoid its sialagogue and promote its diuretic operation in dropsy when we can, as all the cures in hydropic cases that I have seen performed by salivation, so far as I recollect, have been followed by a relapse. The pancreas secretes a fluid nearly analogous to the saliva in its appearance and use, while the liver secretes one of a yellow color, very bitter in taste, considerably tenacious in consistence, and an assistant also in digestion. The kidneys secrete a fluid different from all the foregoing in all its sensible qualities, and of no further use in the system. The glands of the different articulations take from the same mass of blood a fluid unlike either, and destined to a different purpose, namely, to lubricate their different surfaces, render motion easy, and prevent attrition. The inner surfaces of all the large cavities secrete a fluid unlike the last, whose office is to lubricate and prevent adhesion between them and contained viscera.

The testicles secrete one different from all, and which is perhaps of no use to the individual, but of primary importance as respects the existence of the species. One striking peculiarity in these organs is, the time of life at which they commence their operations, at birth or soon after, but these testicles do not begin their secretory action until the animal arrives at a state of puberty. Now all these fluids are derived from the same mass of blood. It is conveyed to, and through the vessels of the different secretory organs in the same way, acting on them all precisely in the same manner, yet their productions are so different. Moreover, the blood has circulated through the spermatic vessels ever since

the formation of the animal; why then did not the secretion of the semen take place before?

Again, the different parts of the animal system are undergoing a constant change and loss; the loss is replaced by secretion, and every secretory vessel concerned in the process separates that precise kind of material required by the organ it serves.

I shall finish this essay by making a few practical remarks.

Is nature thus frugal in her operations, never making use of two instruments to effectuate that which she can accomplish with one? Let us as physicians imitate her example, and be frugal in our prescriptions, never making use of a compound medicine where a simple one will answer our purpose as well.

Let us take warning from the error of the ancients, who appear to have prized their prescriptions in proportion to the number of ingredients of which they consisted. This plan of combining a great number of articles in the same mass or mixture, is in every case inelegant and unscientific, and in many cases produces an inert compound.

Are the effects of remedies varied very much by varying the mode of their exhibition? Let us be very precise in endeavoring to ascertain what mode of operation will be most advantageous to our patient, and very plain in our directions to nurses how to administer it so as to ensure that operation.

Are the effects of medicines varied by the varying state of the system at the time, let us be very particular in finding out that state, never prescribing for the name of the disease, but always having an eye to grade or degree of force. And in order to make a just estimate of the force of existing diseased action, let us consult every index which can direct us, always placing most reliance on that kind of information which is gained from an attentive and minute examination of the symptoms of the case, especially the state of the pulse, the respiration, the seat and intensity of the pain, the state of the skin, the different secretions, and excretions, the appearance of the countenance in general, and the eye in particular, never placing too much dependence on information gained from ignorant nurses or distressed mothers.

With a very few remedies judiciously combined and skilfully administered, a physician may combat successfully, most of the forms of disease he has to contend with. On the other hand if he

prescribes for the name of a disease without having regard to the existing state of the system at the time, the habit of body of his patient, his idiosyncrasies, and the different manner in which medicine will act according to the mode in which it is given, yet even though he may have all the articles of the *materia medica* at his command, they will only be in his hands instruments of mischief, by which he will add to the sufferings of the sick, and perhaps assist the pestilential forms of disease in thinning the ranks of man.

**DISSERTATION ON THE OBJECTS AND DUTIES OF
THE SOCIETY IN THEIR CORPORATE CAPACITY:**

DELIVERED AT BURLINGTON, IN MAY, 1791;

BY DR. GRIFFITH.

Gentlemen—The rule of our Institution requires from the chair I have now the honor to fill, a dissertation on some useful subject. A medical or philosophical theme has usually been selected, as most adapted to the purposes of our Association; and we need only recur to the records of the Society, for excellent examples of taste and ability in the performance of these stated essays.

On this occasion, however, I am induced to depart from the customary practice of considering a single scientific or professional question, and will claim your attention to some general reflections, which occur to me as proper at the present period. A charter of incorporation having lately been granted to us, renders this a very important era in the history of our society. From hence only can we date our existence as a known public body. Under legislative patronage we assume a new capacity, acquire new rights, and become possessed of powers which, if prudently exercised, may conduce much to the happiness of mankind. Let me then, gentlemen, call your attention to some points which may serve to characterize us as men, and advance the cause of humani-

ty, and the commonwealth of science in general. And first, I shall speak of the obligations and duties incumbent upon us as individuals: these are of two sorts—such as we owe to others, and such as are due to ourselves. To those who apply for medical assistance and relief, we owe a faithful and conscientious discharge of that trust and confidence which they repose in us. How weighty and important is the charge committed to us! Life and health, the dearest blessings of individuals, and most material concern of society, are placed under our care. In this respect we are the guardians of blooming youth, the supporters of vigour and manly strength, and the comforters of declining age. The pained and distressed look up to us for relief, and the physician becomes (if I may use the expression) the arbiter of the sick man's fate. Life and death are in his hand. The slightest inadvertence, the improper use of a grain of medicine, may dismiss the confiding patient to the world of spirits. And poor must his consolation be in the moments of reflection, who can only plead ignorance or mistake, for sending his fellow mortal to the grave.

These things render the exhibition of medicine peculiarly important to others; and hence arises the various duties incumbent upon ourselves. How true, and yet how painful is the truth, that many who bear the name have few or none of those qualities which should constitute and adorn the character of a physician. It is therefore, in the second place, necessary that physicians should be properly educated, and when admitted to practice, that they should act up to the dignity of their profession. To form a physician and surgeon requires a greater variety of knowledge than is immediately essential to the exercise of any other learned profession. The practice of physic and surgery embraces almost the whole circle of the sciences; and to fill the character completely one ought to have a critical knowledge of them all. Few however, have the leisure, and the man perhaps exists not, who has capacity sufficient to cultivate and comprehend this variegated and boundless field of literature. But tho' occasion may not present the means, or genius be able to reach the limits of universal science; yet there are certain branches of knowledge which all may attain, and without which no one can hope to practice the healing art with reputation or success. Anatomy, Chemistry,

Botany and Natural Philosophy, should all be studied with unremitting diligence, and a minute apprehension of their several objects, uses and applications, be engraven on the mind as with the point of a diamond: so that the physician may, as occasion requires, call to his aid the discordant elements with which we are surrounded; together with the animal, vegetable and mineral kingdoms, and bid them unite in harmonious concert for the relief and preservation of their great superior, man. But to the acquirements of the head, the character I am drawing should add the gentler, though not less amiable virtues of the heart; humanity, tenderness and sympathy, should be the handmaids of his art. These dispositions have ever a good effect upon human maladies; and where medical assistance is in vain, they serve at least to soothe and mitigate the poignant feelings of the hopeless sufferer; yet must not this sensibility betray him into weakness. The physician should possess firmness of purpose and great presence of mind; he should be cool, collected and deliberate in the most difficult and distressing scenes of human woe. Need I mention too, that temperance, chastity, inviolable secrecy, and strict honor, should accompany him in the walks of his profession. A drunken, a lewd, or a faithless physician is a monster in human shape, and should be driven from the habitations of men.

Thus, would the physician be useful to others, he must in the first place do justice to himself, by acquiring that knowledge and cultivating those virtues which have been just mentioned.

Actuated by principles like these, and governed by such rules of practice, physicians do honor to themselves and prove blessings to the community they live in.

Happy indeed, would it be for society, were they all of this description, who pursue so nice and difficult an art; yet this is far from being the case: for, however mortifying the thought, we must own that no profession so abounds with impostors and ignorant pretenders as the faculty of physic.

Nor indeed, is this to be wondered at, when we consider how simplicity may be imposed upon by cunning, and how impossible it is in cases of medicine to detect the cheat.

Added to this, until within a few years past, the door has been thrown open to all without distinction; and whether impudence,

necessity or vain conceit urged them to enter, they found ready admission and took upon themselves the name of physicians. This, for a great length of time, in New Jersey, was the only pursuit which a man could follow without instruction, or that required no evidences of merit whatever to entitle him to prosecute.

I cannot forbear on this occasion, to express my opinion of that class of impostors, who, without any pretensions to regular science, deceive the credulous and unthinking with tales of wonderful discoveries, infallible recipes, and the surprising power of *simples*. These people, the better to accomplish their purposes, affect to undervalue scientific improvements, clothe their knowledge under a veil of mystery, and deal out nostrums with all the secrecy and solemnity of conjuration.

Hundreds deluded into these snares, daily fall victims to the ignorance and avarice of those who make prey of mankind.

The physician of real merit, who acts up to the dignity of his profession, disclaims the works of darkness; he comes forward into open day, declares the principles upon which he proceeds, the remedies he applies, and freely communicates his discoveries and improvements, that the world may profit by the fruit of his labor.

But I cease to contrast characters which cannot indeed bear comparison. I shall leave these self-taught physicians and prodigies of nature to reflect on the difference between those who kill by nostrums, and those who make use of poison and daggers. With pleasing solicitude I look forward to the period, when these dregs of the profession will be purged off, and with them the odium they have brought upon it; when the name of physician will be synonymous to the man of science, honor and benevolence.

But secondly, permit me to call your attention from what should actuate and distinguish us as individuals, to those important objects which claim our regard in a collective capacity. Here our sphere of action is greatly extended; to the exertions of private men we have now superadded a political energy; having the power of making all such by-laws and ordinances as can in any wise tend to the advancement of medical usefulness.

By a law, passed in the year eighty-three, those who would become practitioners of physic and surgery, are required to under-

go an examination of a committee appointed for the purpose by the justices of the Supreme Court. A certificate from that committee, declaring the candidate duly qualified, will procure him a license to practice throughout the State.

Although the justices of the Supreme Court have a discretion in appointing examiners, yet at first, through the courtesy of the late honorable David Brailly, deceased, and since then of the present justices of the Supreme Court, examiners have uniformly been selected from amongst the members of this Society.

By this, we are become responsible for those who are admitted into the profession; they go forth into the world with our sanction and approbation; and by our certificate we publish that they are worthy to be entrusted with the lives of men.

Let us be careful then, to require the most satisfying evidences of professional knowledge before they obtain this recommendation.

We now have the opportunity of patronizing merit, and disowning ignorance and mere pretension. Let us then execute this part of our trust with the most impartial justice; neither refusing our testimony in favor of those who deserve it, nor yet granting it to those who deserve it not.

Another object of high importance, is the framing of such rules and ordinances under our charter as may tend to repress the evils complained of in private practice. All unfair dealing, or ungentleman-like behaviour from one physician to another, when designed, and clearly proved, should fall under the censure of this public body. We cannot indeed inflict punishments affecting the person or property of any one; but by reprimand or expulsion it is in our power to prevent much irregularity of practice, and to establish amongst the faculty an uniformity and consistency of character. The nature of our employment lays us open to the attacks of malice, and the machinations of self-interest; and when such motives govern a fellow practitioner, how easy it is for him to do an irreparable injury to the one he would disgrace or supplant.

For the honor of our society I could wish there was less cause for providing against mischiefs of so disagreeable a nature.

Besides preventing or punishing unfair advantages in practice between neighboring physicians, our regulations should be particularly pointed against the admission or retaining of such

characters who from notorious vices, by a general depravity of conduct, or acknowledged ignorance and mal-practice, are unfit to be enrolled amongst the Medical Society of New Jersey.

Next to these, the attention of the Society in its corporate capacity should be turned to the subject of compensations. Moderation and uniformity of prices in the practice of physic, should, if possible, be observed. Nothing has a greater tendency to injure the profession of medicine than the inequality of prices and the jealousy entertained by the mass of mankind with respect to the equity of physicians.

That men who devote their talents, their time, their health, and comfort to the wants and necessities of others, should have a decent and cheerful support, can never be denied; but on the other hand, it is right for those whose misfortunes make such assistance necessary, to know that they pay no more than is just and reasonable.

For all common services in physic and surgery, it will be easy to settle the rate of compensation; if this be done with care and moderation, and adhered to by the professors, much difficulty and embarrassment will be avoided in the settlement of accounts. People will be satisfied in knowing that they pay by rule, and not by humour; and the fair practitioner no longer lie at the mercy of those whose interest it is to misrepresent and exaggerate his demands.

Many other considerations of a public nature might be mentioned as particularly proper to engage the attention of this Society under the first operations of its charter; but the limits of an address will not allow me to be more minute; it must be left to the wisdom and experience of those who hear me, to suggest and carry into execution such further regulations as may advance the interests of our Institution.

Thus have I briefly pointed out some of those duties which pertain to us as individuals; and some objects of immediate and primary concern to us in our public character.

I conclude, gentlemen, with wishing all imaginable prosperity to this Association; may it from this era acquire new usefulness and importance, and the faculty of physic become as honorable to the profession as it is beneficial to mankind.

BURLINGTON MEDICAL ASSOCIATION.**DR. PARRISH'S REPORT ON OBSTETRICS.**

The report on obstetrics will necessarily be confined to the observations of the Reporter within the sphere of his own labors in that department of practice. While it is gratifying to be able to state, that our community has not been visited with any puerperal disease of an epidemic character, we are obliged to record the fact, that a number of our patients have required unusual attention on account of a preternatural condition of the lochial discharge. This secretion, it is well known, retains its sanguineous character for about three days after labor, when it becomes paler, thin, and watery, and speedily disappears; but in the cases referred to, instead of assuming its natural appearance at the termination of the third or fourth day, it became of a dark color, and very offensive, so that it was deemed necessary to use cleansing and antiseptic injections, both on account of the danger of absorption, and for the comfort of the patient and her attendants. In thirty-one obstetric cases which have come under the care of your reporter within the last three months, eight presented the complication referred to—the discharge in most instances, was of the consistence of molasses and very similar in color; this de-ranged condition of the secreting surface, resulting probably, from a tendency to some more violent form of puerperal disease, was manifested also, in a uniformity of constitutional symptoms; fever generally attended, and a feeble, accelerated pulse, so that gentle stimulants and tonics were administered with benefit. In several instances these symptoms were preceded by a rigor. In one case there existed a displacement of the uterus. The patient complained of pain in urination, attended with frequent calls to empty the bladder, and with a disagreeable sensation of distension in the upper portion of the vagina, with a degree of heat in the part. These symptoms suggested the propriety of an

examination per vaginum, which revealed a complete ante-version of the uterus, the fundus-uteri, being thrown forward into the cul-de-sac between the bladder and vagina, thus preventing the escape of the secreted fluid from the cavity of the organ; instead of passing through the os-uteri it gravitated into the fundus, and there accumulated till the offensiveness became almost intolerable: an adjustment of the displaced organ, caused it to empty itself of the offending secretion, and the difficulty was speedily removed. One melancholy case of malignant puerperal disease came under the notice of your Reporter. The patient was a female, aged 35, the mother of nine children. She was a laborer, and till within an hour of her accouchment was actively engaged in her toilsome duties. She was attended during her labor by a mid-wife, but her pains continued unceasingly after the child and placenta were removed, so that she was heard to cry out with agony from the extreme violence of her symptoms. About an hour after the birth I saw her, the bandage had been applied, and the duties of the mid-wife seemed to have been properly performed, the abdomen was greatly enlarged however, and the uterus was not felt in its place, upon pressure with the hand. Hot fomentations were directed to the abdomen, and a dose of calomel and opium given immediately, with directions to continue the treatment till my next visit—the patient was soon partially relieved, and fell asleep; the nurse also, fell asleep, and the cry of one of the children in the adjoining room awaking the mother, she arose from her bed, and went in to the child to give it water, with bare feet, and with no clothing but her night dress. Another paroxysm of severe pain soon returned, to relieve which, leeches were applied to the abdomen, followed by a large plaster of cantharides—the pulse was feeble, the countenance anxious, the tongue loaded with a brown fur, the skin cool, with a close sticky perspiration over the surface, the symptoms did not yield, and the strength of the patient being much exhausted, quinine, wine whey, and other stimulants were administered, but the disease progressed rapidly till it terminated life on the third day. The close was characterized by a remarkable development of the peculiarly terrible agonies of the last stage of puerperal fever. The day following the child was taken ill, and an erysipelatous inflammation appeared over the abdomen

and hips of the little sufferer, extending within the vagina, and at the time I saw it, was of a dark brown color; the integuments were hardened, and skin cold; the nurse now informed me that the mother was in the same condition, and at the time of the birth was very much inflamed all around the genitals, upon the abdomen, hips, and thighs, and that she had complained of a burning sensation in those parts, before she was confined. This attack was not ushered in by a chill, it did not present any premonitory symptoms, it came without warning, and was speedily fatal; no autopsy was made, it was not requested on account of the fear of receiving the infection, and conveying the disease to others. The case was remarkable for the suddenness of its attack, its severity, and its speedy termination. The history of this case, and the symptoms of puerperal fever being the prominent indications, taken in connection with the fact of the erysipelatous inflammation externally, give good ground to suppose that the disease is erysipelas. A neighboring practitioner recently informed me that while visiting a patient with a phlegminous erysipelas of the leg, being engaged in dressing the abraded surface, he was called to attend a parturient female. He washed his hands thoroughly, and waited upon the lady. Twenty-four hours after the termination of the labor she was seized with a chill, ran through a regular course of puerperal fever, and died. There was no disease of the kind prevalent at the time, in the neighborhood. Your Reporter would invite attention to this circumstance, and suggest that it may not only be a very interesting, but important enquiry how far there may be a coincidence in the approach and progress of erysipelas and puerperal fever, in the same neighborhood, at the same period of time.

The diet of infants is a subject to which the Reporter would solicit attention in this connection. It is well known that the common practice of the country is, to fill the stomach of the new-born infant with hot water and molasses, as soon as it is dressed. Almost every nurse considers this among the most important duties which she owes to the object of her care, and with what assiduity it is practised, every obstetrician can testify. So far as the influence of the writer extends, particularly within the sphere of his own practice, this common diet is not admitted into the lying-

in-room. It is but little that the infant requires, save what it obtains from its mother's breast. As before it can properly appropriate any nourishment, its alimentary canal must be cleansed of the secretions which have accumulated while in the cavity of the uterus, and this cleansing of the bowels can best be accomplished by the fluid from the mother, which precedes the approach of the properly organized milk. There is a singular adaptation in the quality of the nutriment, to the wants of the child at different periods. Nature has been remarkably provident in this respect, and it behooves those to whom the care of infants belong, to beware lest they interfere improperly with the regular operations of nature. Much prejudice stands in the way of putting the child to the breast as soon as the mother is able to bear it.

It is the general practice to wait till the third day, and the approach of milk is announced by a severe rigor. A chill on the third or fourth day is looked upon as a good symptom, because we are then certain that milk has formed. To save a woman from a chill, should be the prominent care of the physician; to do this, put the child to the breast an hour after labor, if possible, and continue every three or four hours to supply it with the draught which kind nature has furnished, and by the time it is prepared to receive the stronger nourishment, the same fountain will be ready to supply it. If there should be a necessity for an additional quantity of nutriment, it appears to us important that we should substitute a fluid as nearly allied to the maternal nourishment as possible. Molasses and water, or water boiled with biscuit, does not certainly resemble in quality the maternal food, and should therefore be avoided. A very pleasant, nourishing, and harmless substitute may be formed in fresh new milk or cream diluted with rennet whey, in the proportion of one part of the former, to two parts of the latter. This, sweetened with loaf sugar, forms the diet which we universally recommend, where there is any need for an artificial supply; and it is submitted to the Association as well worthy their consideration.

BIOGRAPHICAL NOTICES.

BIOGRAPHICAL MEMOIR OF JOHN COCHRAN, M.D.

BY ELIAS J. MARSH, M.D.

Brief and scanty are the memorials of a physician's life. It is passed in retirement and privacy; the chambers of the sick and the hovels of the poor are generally the scenes of his skilful and benevolent labors; and though his services are highly appreciated at the time, yet they are so personal in their nature, that the memory of them seldom outlives the generation to which they were rendered. Half a century generally suffices to obliterate the name and reputation of men eminent in their day, for great professional acquirements and skill, and if any faint traditional memorials are preserved longer they are evidences of very great professional desert, or what is more likely, of other than professional merit. Some few names, identified with great discoveries, or vast benefits to the human species, float above the waves of time, and will float on as long as history and civilization last. Other names there are, not so eminent it is true, yet which a grateful country will not willingly let die. Names distinguished for public services, and associated with the great and good in their country's annals. Of this class was Dr. John Cochran, the subject of the following memoir.

This respectable physician was born in Chester County, Pennsylvania, on the 1st of September, 1730; his father was a respectable farmer, who emigrated from the North of Ireland to this country. The son gave, early proofs of a fondness for liberal studies and a desire to learn a profession, and was placed by his father under the charge of Dr. Francis Allison, one of the best classical teachers of his day. After completing his preliminary education under this accomplished master, he commenced the study of medicine, at Lancaster, Pennsylvania; here he pursued his professional studies with diligence and attention under Dr.

Thompson. About the time he finished his medical studies, the war between England and France, in 1755, known as the old French war, broke out in America; and Dr. Cochran, thinking the army offered a wider field of usefulness and improvement than any he could find at home, obtained the appointment of Surgeon's Mate in the Hospital Department. He continued in this situation in the Northern Army during the war, and acquired great experience and skill under the able instructions of Monro, and other able army surgeons and physicians. The knowledge he had acquired of the Medical Police, and Hospital Service of armies, was of great use to his country in his subsequent career.

After the termination of the war, he left the service and settled in Albany, where he married the only sister of General Schuyler. From that city he removed to New Brunswick, in this State, where he practiced physic and surgery with great reputation and success. While living here, he united with other medical gentlemen of the State, in forming the New Jersey Medical Society, and of which he was elected President in 1768. This Society was formed to promote friendly intercourse and good feeling among the members, to elevate the character of the profession and to suppress quackery and imposture. The better to accomplish these objects, Dr. Cochran took an active part in procuring the passage of the Act of 1772, to regulate the practice of physic and surgery in this Province. For his services upon that occasion he received a vote of thanks from the Society.

On the breaking out of the war of Independence, Dr. Cochran, sharing in the warm feeling of patriotism which appears to have prevailed almost universally among the members of the profession in this State, took part with his country; and towards the close of the year 1776, offered his services as a volunteer, in the Hospital Department. General Washington, desirous of securing the services of so experienced and able a physician, in the Winter of 1777 recommended him to Congress in the following words: "I would take the liberty of mentioning a gentleman, who I think highly deserving of notice; not only on account of his abilities, but for the very great assistance which he has afforded in the course of the winter, merely in the nature of a volunteer. This gentleman is Dr. John Cochran, well known to all the faculty.

The place for which he is well fitted, and which would be most agreeable to him, is Surgeon General of the Middle Department; in this line he served all the last war in the British Service, and has distinguished himself this winter, particularly in his attention to the small pox patients and the wounded." Congress, acting under this recommendation, appointed him on the 10th of April 1777, Physician and Surgeon General in the Middle Department. The experience he had gained in the service during the former war was of great advantage now. The Hospital Department he found in a bad and neglected condition; he introduced many improvements, and greatly contributed to the comfort and welfare of the sick and wounded under his care. So highly were his services and abilities appreciated by Washington, that in 1780, learning that a new arrangement was about to take place in the Medical Department, and fearing that the contemplated arrangement would probably be so influenced by party spirit, that it would operate unfavorably on Dr. Cochran and others, he wrote to Congress "that Dr. Cochran and Dr. Craik, from their high services, abilities, experience and close attention, have the justest claim to their country's notice, and are among the first officers in the establishment." In the month of October, 1781, Congress, doubtless influenced by this advice, gave him the appointment of Doctor General of the Hospital of the United States. He discharged the duties of this high office with his usual judgment, fidelity and integrity, and a writer observes, "that while other gentlemen, high in the Medical Staff, were disgusting the public with mutual charges and criminations, Dr. Cochran always presented the character of an able physician and an honest man."

Soon after the peace, Dr. Cochran took up his residence in the city of New York, where he pursued the practice of his profession, until the adoption of the Constitution, when President Washington, retaining, to use his own words, "a cheerful recollection of his past services," nominated him to the office of Commissioner of Loans. The duties of this office he continued to discharge until he was disabled by a stroke of paralysis, when he resigned and retired to Palatine, Montgomery County, New York, where he died April 6th, 1807, in the 77th year of his age.

As a physician, Dr. Cochran, leaving fanciful theories and ingenious speculations to men of more lively imaginations, carefully studied the lessons of experience, and brought to the treatment of disease great care, rare judgment and tenderness. As a public officer he was vigilant, faithful and upright; and as his life was passed in the profession of the christian faith, and in the practice of the christian virtues, in death no cloud of doubt obscured his prospect of immortality.

Paterson, August, 1848.

EXTRACTS FROM A MEMOIR OF BOWMAN HENDRY, M. D.

BY A PHYSICIAN.

The parentage of Dr. Bowman Hendry was highly respectable. His grand parents immigrated from England, at an early period in the colonial history of America, and settled in Burlington, New Jersey, where his father, Dr. Thomas Hendry, was born. After some years, the family removed to the beautiful village of Woodbury, Gloucester county, in the same state, where the subject of this memoir first saw the light, on the 1st of October, 1773.

His father, Dr. Thomas Hendry, secured an extensive practice, and maintained, through life, an enviable professional reputation, in Woodbury and its vicinity. His mother was an English lady, remarkable for those traits of character which command respect, and call forth the affections, in all the social and domestic relations. The powers of her mind were of a superior order; cultivated and expanded by education; and their influence became evident in the excellent training of her children—especially in the development of those amiable moral qualities which distinguished her son, Bowman, throughout his long and useful life. The family name of Mrs. Hendry, was Bowman, and hence the origin of the rather uncommon appellation bestowed upon the youth whose history we are about to trace.

In the rural village of Woodbury, amidst lovely natural scenery, far from the pleasures and vices of great cities, Bowman Hendry

passed his happy childhood, increased in youthful vigour, and gradually formed those habits of contemplative thought, those feelings of kindness and gentleness, which, even in his earlier years, addressed themselves so forcibly to the hearts of others, as to engender similar feelings in the breasts of all who knew him. Though but few records of his youthful days remain, enough has been preserved, to prove that he was an affectionate child, an obedient son, and intensely devoted to study.

Not only during his boyhood, but throughout his life, his native village was, with him, an object of the deepest attachment; and love of home is a hallowing sentiment, hardly to be appreciated by the denizens of capitals. In a great city, a few years pass by, and the home of your childhood is gone; the sacrilegious hand of progress has been laid upon the monuments of cherished affection; commerce—wealth—improvement—have exacted change upon change; and the place of your birth is recognized no more! But, in the country, your children's children may drink at the same old well; they may sport beneath the same old trees; and home continues to be home.

Of all the circumstances which, in our early years, exert a lasting influence upon character, perhaps the most important is the choice of companions. Among the early associates of young Hendry, during the toils and pleasures of academic life in Woodbury, were the late distinguished and lamented Commodore Decatur and his brother; with both of whom, a friendship, there formed, subsisted throughout the diversified career of the parties. There, also, was the late Captain Lawrence, of the U. S. Navy, and the justly celebrated Andrew Hunter, a finished scholar, an accomplished gentleman, and an able lawyer, who stood for many years at the head of the legal profession in his native State. Mr. Hunter filled the office of Attorney-General of New Jersey, for several years, and his forensic and legal capabilities caused him to be admired in life, and truly lamented in death. In company with these, and many other most distinguished citizens of the State and times, Dr. Hendry received his education as an academy boy; and there still stands the old, time-honoured temple of learning, at this day! The storms of years have beat upon its head; scores of young men have been educated within its walls; they have

gone forth, generation after generation, to the perilous battle of life; the pupils lie scattered in death over the wide-spread field; but the venerable edifice remains an object of affectionate respect, the parent of literary eminence, and the scene of continued usefulness up to the present hour.

The principal preceptor of those days, in the Woodbury Academy, was a Mr. Hunter, a gentleman of high literary attainments, and a classical scholar of ample ability. Under his tuition Bowman Hendry received an education far more liberal than was generally obtainable, even by youth of respectable parentage, at that early period, when the whole country was struggling to recover from the ruinous results of the revolution; in which many families holding elevated positions in the social scale had lost their all. The kindness and gentleness of his disposition has been already mentioned, and that peculiar politeness which formed a feature so remarkable in his character throughout his entire career, displayed itself as an inherent principle, even during his academic course; it was merely expanded and perfected by further intercourse with mankind. In fact, the boy was a natural gentleman, in feeling and deportment. This trait, which, no doubt, constituted one of the important elements of his success in life, is prettily illustrated by the following incident.

While Bowman and the other young persons previously noticed, were fellow pupils at the Academy, they were accustomed, on leaving school, to proceed along the main street of the village, in company; and, at a certain hour, they almost invariably met a stranger youth, a carpenter, who was temporarily working in the place. As the young carpenter sometimes passed along, with part of his tools upon his shoulder, none of the lads took any notice of him except the embryo physician, who uniformly returned the salutation of the young mechanic with a graceful bow and a touch of the hat. This manner, so different from that of the other boys, so strongly attracted the attention of the carpenter, that, one day, after such an exchange of courtesies, he inquired of a colored lad, "who is that young gentleman with light hair tied in a queue, who has spoken to me so kindly and politely?"

"That," replied the negro, "is Bo Hendry, the son of Dr. Hendry, of Woodbury."

The carpenter removed to a part of the country near Ellisburg, where he married and settled in business; but ever after, during the long period of fifty years, he cherished, and on proper occasions displayed the most grateful remembrance of young Hendry's politeness towards a stranger. Thus, a little act of courtesy, the spontaneous offspring of good feeling and good principles, was repaid by a reward above all price—the life-long respect and friendship of an honest man.

The literary course of young Hendry, at Woodbury, was concluded with distinction. Possessed of a tenacious memory, apt in the acquisition of knowledge, and displaying the habits of a close student, whatever he attempted in the course of his education was fully acquired and firmly retained. He left the academy with its highest honors, and, at the age of seventeen years, commenced the study of medicine, under the preceptorship of his father, whose age and attainments amply qualified him for the correct initiation of his son into the theory and practice of this noble science.

In a short time, a different arrangement was made, and young Hendry was sent to the city of Philadelphia, for the purpose of pursuing his medical studies under a distinguished practitioner of that metropolis, and attending the medical lectures at the University of Pennsylvania.

The transition from the tranquility and moral propriety of a country village, to the noise, confusion and allurements of a city, where the very atmosphere is supposed to be contaminating to the inexperienced; where fashion, folly and vice are so often rendered attractive and destructive, was no unimportant trial—no insignificant ordeal. But the mind of Bowman Hendry had been fortified by his previous moral training: the pious admonitions of a beloved mother had provided him with an armour of proof, and he passed the fiery test unscathed.

The University of Pennsylvania was, at that period, the only thoroughly organized medical school in the United States. In the year 1762, Dr. William Shippen delivered a course of medical lectures in Philadelphia, which, with the clinical teachings of Doctors Thomas and Phineas Bond, the fathers of the Pennsylva-

nia Hospital, and the anatomical labors of Doctor Chauvet, gradually brought about the foundation of the Medical School of Philadelphia. In 1765, the Medical College of Glasgow regularly appointed Doctors Shippen and Morgan as Professors therein; and thus was established the first or parent school of America, from whence, as from a prolific mother, all existing institutions of similar character in this country took their rise.

On arriving at this great fountain-head of medical learning, young Hendry became resident, as a pupil, in the family of the late highly distinguished Dr. Duffield, where the various relations which render life desirable and pleasant, were displayed in the most attractive form. His advantages in personal appearance, his urbanity of manners, and the invulnerable quality of his moral principles, elicited admiration, commanded respect, and secured confidence and friendship wherever they are most desirable; and nowhere was this more remarkably shown than in the family of his preceptor. The society of ladies tends strongly to refine and purify; and nothing more effectually removes rusticity, than female influence operating upon a sensitive and intelligent mind, when the heart of youth has escaped corruption by vice and evil habits. Our pupil was fully prepared to improve, and did most effectually improve the admirable opportunities now offered, for the favorable development of character and manners.

During the entire *curriculum* of three courses of medical lectures which young Hendry attended, uniform testimony is borne to his strict punctuality, indefatigable industry, and earnest zeal in the acquisition of every species of knowledge connected with the honorable profession of his choice. As a student of medicine, neither his finances nor his fancies ever led him to spend money with the prodigality of a profligate, nor did he evince the penuriousness of a narrow mind. He was liberal and generous, but not profuse; avoiding meanness on the one hand, and extravagance upon the other.

During the time of his attendance at the University, young Hendry enjoyed the opportunity of hearing and profiting by the lectures of some of the most eminent Professors of that or any other period: such were those of Professor Shippen, on Midwifery,

Anatomy, and Surgery; the venerated Benjamin Rush, on the Institutes of Medicine and Clinical Practice; the celebrated Woodhouse, on Chemistry; Professor A. Kuhn, on the Practice of Physic; and Professor Ewing, the Provost of the University, on Natural Philosophy, &c. Our student was also favored to attend many occasional lectures, together with the actual demonstrations of the clinical and anatomical departments of the Pennsylvania Hospital, and reaped such practical advantages as were then afforded by the Philadelphia Almshouse. If, in the multitude of councillors there is wisdom—if, in the full complement of instructors there is the certainty of knowledge, the medical students of that day should have issued from the halls of their respected *alma mater* fully prepared to enter the great arena of life, and to act with wisdom and effect, under the sacred injunction, “heal the sick!”

Time passed rapidly and agreeably with young Hendry, and his novitiate was drawing towards its close, when there occurred an era memorable in the history of Pennsylvania—“The Western Insurrection”—and great excitement immediately ensued among all classes of the community in Philadelphia. Without entering into details unconnected with this memoir, it is proper to state that the disturbance was caused by the resistance offered in some of the western counties of Pennsylvania to the excise law, or tax upon the distillation of whiskey: hence, those engaged therein were called “The Whiskey Boys.”

A vast amount of military enthusiasm was created in the city by this outbreak; not that the immediate cause of the insurrection was deemed of vital importance, but that the love of “law and order,” which is necessary to the preservation of all government, affected the people generally. The troops were called out; the whole town was in a war frenzy; nothing was heard save warlike music—the drum and fife, the loud tones of the bugle, and the spirit-stirring trumpet. The black cockade, the emblem of the Federal government, and, indeed, of the Federal party, generally, was mounted and worn at all times and in all places, by the zealous partisans of the authorities in power.

To this party our student, young as he was, belonged. Though only about twenty years of age, he was fired by the prevalent pa-

triotic enthusiasm, became engaged in the expedition then preparing for the field, and shouldered his musket, as a private, in the ranks.

Before the troops marched, his venerable father heard of the affair, and came from Woodbury in all haste, to thwart, if possible, this purpose of his son. The troops were then mustered in line, in one of the principal streets of the city, and the old gentleman made his way through the crowd until he reached the spot where stood his son, in the garb of a soldier. The meeting was unexpected; yet the father was kind; and, discovering the fixed desire of the young man to take part in the struggle, he relinquished his opposition, and gave evidence of his own patriotism, by his parting words: "Go, my son, and never disgrace the American flag!" then, with deep feeling, he returned to soothe the natural fears of the mother and family.

When the military array was completed, great anxiety was felt among the troops as to who was to take the chief command, when, at the proper moment, the governor of the state, "Tommy Mifflin" himself, in the blue and buff uniform of a general officer, appeared in the midst. A shout from assembled thousands arose upon the air, the music sounded, the troops were wheeled, and thus they commenced the campaign, with the beloved little governor at their head.

Bowman marched with the expedition until the troops reached the town of Lancaster, where a halt took place. To the student, this tramp, under the weight of a musket and knapsack, was no matter of jest: being a slim and delicate youth, and unaccustomed to hard tasks, he was, in fact, nearly overcome by the unusual exertion. Professor James, the surgeon of the troops, with whom he was well acquainted, saw the condition of the young soldier, and declared that he should march on foot no further, but become an assistant in his department. But how was this to be accomplished? Young Hendry was not yet a graduate.

Professor James, with characteristic kindness, undertook the whole management of the affair, upon the plea that the exigency of the case justified an unusual course; and Bowman was sent back to Philadelphia, with letters to the members of the faculty, and several other persons of prominent influence, requesting the

professors of the University to convene and examine the candidate for medical honors, even before the college commencement.

The patron having waited several days, without hearing from his *protégé*, started post for the city himself; and finding the young man not yet examined, succeeded, by his personal influence, in effecting the desired result: the professors met, and the novel proceeding was acceded to, upon the condition that the candidate would consent to submit to a very rigid examination. How many mortal hours he was subjected to the awful ordeal, has not been recorded; but he came forth from "the Green Box" triumphantly, and received the legitimate diploma from the hands of the provost and professors.

Dr. Hendry was then appointed Assistant Surgeon to the troops of the Western Expedition, and immediately returned to the army, in company with his indefatigable friend.

It is well known that the western insurrection was a bloodless war. The young Doctor had, therefore, no opportunity to exhibit his skill in the surgical art; but the march, the camp, the duties, furnished him with lessons for future life, upon which he did not fail to improve.

The troops were absent some months; and, on their return to the city, the Doctor was discharged with honor, and, perhaps, not without some pecuniary advantage. After a brief sojourn with the family of his preceptor, Dr. Duffield, whose daughter was the magnet attracting him in that direction, he proceeded to his paternal home in Woodbury, to commence the active duties of life, upon an independent footing.

The youth of Dr. Bowman Hendry thus happily concluded, he was received in his native village as one who held claims to the confidence, respect and affection of the community, rather unusual with those who have barely reached their majority, though crowned with academic honors; he had already moved as a man among men, and had acquitted himself with credit, in a public position of no inconsiderable responsibility.

The path of life now lay fully open before the young man, and the choice of a proper theatre of action necessarily became a subject of serious consideration with himself and the friends most deeply interested in his future welfare. After a survey of the

entire ground, it was resolved that he should commence his medical career in Haddonfield, Gloucester county, New Jersey; and accordingly, in the year 1794, he commenced practice as a physician and surgeon, in that pleasant and improving village and its vicinity.

But there existed, previously to that time, a colonial act, entitled an act to regulate the practice of physic and surgery in the colony of New Jersey, passed September 26th, 1772, prohibiting the practice of those professions by any person whatsoever, until "examined, approved, and admitted," by two judges of the Supreme Court, aided by such persons as they might see fit to call to their assistance in the execution of their duties. The operation of this salutary law was, of course, temporarily suspended by the confusion resulting from the American Revolution; but, on the 26th of November, 1783, an act of similar import and intention was passed by the Assembly of the State, a Board of Examiners being therein appointed, as aids to the judicial authorities in carrying out its provisions.

This curious law remained in force until the incorporation of the present Medical Society of the State of New Jersey, in 1816; and thus the subject of this memoir became liable to its provisions, although already armed with the diploma of the first medical school in the country. That the act had not sunk into desuetude when Dr. Hendry commenced his career, is sufficiently proved by a document which is still in being, and possesses, in these modern days, a species of historical importance. This *ancient* instrument contains the necessary legal certificate of the professional qualifications of Dr. Hendry, signed by the members of the Board of Examiners, Doctors Nicholas Bellville and Ebenezer Elmer, two of the most eminent physicians of that day, dated March 9th; and also, the authorization of the Judges of the Supreme Court, the Hon. Jas. Kinney, and the Hon. Isaac Smith, dated March 11th, 1796.

It will be found, however, that the young M. D. was by no means disposed to depend for his success in the battle of life, solely upon this double *Aegis*,—this two-fold diploma,—which might have been obtained by any industrious and ready student. Above all tricks of trade, to use the words of a distinguished medical

and personal friend, Dr. Joseph Hartshorne, he "practised no art but the art of healing;" and, from the very commencement of his career, the high-minded physician pursued the steady purpose of the honorable man, with the indomitable energy which controls success. It is not to be supposed that he escaped those anxious thoughts in relation to an ultimate establishment in profitable business, which naturally beset the candidate for professional patronage, upon ground pre-occupied by old and long established practitioners; but he was supported above despondency, and encouraged to promptitude in action and fervency of hope, by an unfailing self-reliance, founded upon the consciousness that his professional knowledge most fully qualified him for his allotted task, and that the disadvantages of youth—that formidable obstacle to public confidence in medical men,—was daily passing away, with all desirable rapidity.

When Dr. Hendry commenced his professional labors at Haddonfield, he found there two physicians of long established reputation in the village. These gentlemen were, Doctors Blackwood and Tallman. But notwithstanding this apparent disadvantage, the practical skill and urbane manners of the young aspirant won rapidly upon the trustful respect of the community, and he soon became engaged in an extensive practice.

About the year 1796, though the precise date is not recorded, the entire professional field was left open to Dr. Hendry, by the removal of his senior competitors; Dr. Blackwood having changed his residence to Mount Holly, and Dr. Tallman being removed by death. Under these circumstances, his practice increased with singular rapidity, until it embraced the whole surrounding country, and even encroached upon the circuit of his father, in the neighborhood of Woodbury; and the unbounded confidence which that father reposed in the professional ability of the son was no mere creature of parental fondness—it was warranted by the universal reliance on the tact and judgment of the young practitioner, both within and beyond the ranks of the profession.

Being now firmly established, the subject of our memoir deemed it prudent to conclude his long protracted engagement with the daughter of his former preceptor, Dr. Duffield. Accordingly, the marriage was consummated, and the happy parties entered upon

the novel duties of house-keeping at Haddonfield, the residence and office being conveniently situated under the same roof, in the most agreeable part of one of the most attractive villages of West Jersey.

From this time forward, all the energies of Dr. Hendry, both physical and moral, were most strenuously devoted to his professional duties. He was never known to refuse a call. By day or by night—in heat or in cold—in sunshine or storm—if a mortal man and a good horse could make their way to the scene of action, no patient was ever disappointed; and thus, he continued to fulfil the onerous obligations of his honorable calling, during a term of more than forty years, without a competitor to divide with him his vast responsibilities throughout a wide range of territory. The members of the faculty with whom he was constantly associated in distant consultations, united with the general public in conceding to him that elevated position in the profession which none attempted to dispute. He became "*the doctor*" of Gloucester county, his rides extending from the Delaware to the seaboard, and being not unfrequently pushed, at the request of other practitioners, to the very extremities of the State.

To those who should attempt to estimate the amount of physical endurance required for the exercise of such a vast range of professional duty, by the facilities enjoyed at the present time, and in most sections of our now populous country, the possession of this great amount of patronage will probably be viewed as a singular example of unalloyed good fortune. But in order to appreciate with justice the debt of gratitude due by the community to this indefatigable public servant, we must take into view the nature of his labors in an age when the division of labor was unknown in the practice of medicine, and when a large portion of territory within his regular circuit—thousands of acres of which are still a tangled wilderness of pines and cedars—was very sparsely inhabited, by a people in a state of primitive simplicity, among whom the refinements and luxuries of life were unknown, and who were so extremely poor that the professional benevolence could calculate upon slender reward beyond the prayers of grateful hearts. The following amusing anecdote will serve as an illustration of the then existing condition of society.

During about fifteen years of the early part of his professional career, Dr. Hendry rode upon the saddle. By night or day, in heat or cold, storm or sunshine, he was on horseback. At length, resolving upon an improvement in his mode of travelling, he purchased, at a vendue, an old-fashioned sulkey, of the kind used in those days, by the rich and aristocratic portion of the community only. This article was an ordinary chair, placed upon wooden springs, open to the sun and rain: for, in those days, a top cover would have been considered ridiculously effeminate! The whole establishment—harness to match, &c.—was struck off to the purchaser at *thirty dollars!* An old Friend who had witnessed his extravagance, quietly remarked, “Doctor, I fear thee is too fast in making this purchase:—Thee will not be able to stand it and make thy income meet thy expenses!” In this, the old Friend was perfectly sincere; only intending to recommend the conscientious caution of his sect, in all their financial dealings; and his remark furnishes a strong proof of the primitive simplicity of those times.

The introduction of one luxury usually demands the adoption of others: Dr. Hendry soon found that he required a light when driving along the intricate “pine roads” by night; and he accordingly commissioned a friend, to procure, from the city, a pair of coach lamps. The agent, anxious to oblige, but ignorant of the proper proportions of carriage lamps, procured a huge pair, each approximating the size of a bucket; but the Doctor made the best of the bargain, and appended them to the sulkey, where, when properly armed with a pair of spermaceti candles, they rendered awfully luminous the defects of both the road and the establishment, much to the edification of old Silver-tail, his favorite horse. Soon after the lamps were put on duty, and while the Doctor was travelling on a dark night, from Hamilton to Long-a-coming, he was startled, in a dreary part of the road, by the cry of *Murder! Murder!* Halting, and listening attentively, he found that the cries were in front; and lashing his horse to speed, he gained rapidly on the sounds, until, in a few minutes they seemed to turn into the forest and become faint in the distance. The Doctor, finding it impossible to follow, or to fathom the mystery, drove on.

Passing, next day, through the same part of the country, and observing the people standing in groups about the door of the village tavern, he alighted, and entering the house, inquired what had happened to produce such excitement in the neighborhood.

He was informed that a most dreadful affair had occurred during the preceding night. An old wood-cutter, one of the boldest men in the vicinity, on returning late from his work, had been pursued by a monster of most horrid appearance. It had great eyes of fire; a long body, and a monstrous tail, which it flourished, from time to time, as it pursued the frightened forester!

As the Doctor was very fond of a joke, he took pains to humor this capital affair, asked numerous questions, manifested great concern, and stated that, as he passed along the same road, that night, he had himself seen the monster; adding his conviction that the creature would make itself visible again, somewhere about midnight. Accordingly, about eleven o'clock, that evening, he drove into the village, in his regular round of duty—lamps glowing, the sulky rattling, and the whip flourishing merrily round old Silver-tail. The inhabitants—men, women and children still out of bed—were gathered around the tavern porch, awaiting news of the terrible visitant; and loud was the shout from the crowd, when, stopping before the door, the monster stood revealed!

“Dr. Hendry’s monster” remained a standing jest in that neighborhood, for many years; but, for a long time, the old wood-chopper never permitted the sulkey to pass, without a critical examination of the lamps; as if still suspicious of some lurking principle of life about the curious machine. The inhabitants of that region had never before witnessed such “a new-fashioned extravagance” as a carriage with lights.

Had the professional circuit of Dr. Hendry been solely or even chiefly confined to the vicinity of such villages as Haddonfield, Camden, and Woodbury, where, after the death of his father, it became much enlarged, or had his customary daily rides in other directions been circumscribed by Blackwood-town, Evesham, and Cropwell—the two latter places being chiefly settled by members of the society of Quakers or Friends, among whom his practice was extensive—his duties, though arduous, might have been ac-

complished with comparative facility, and, while less extraordinary powers of physical endurance would have sufficed for the fulfilment of the task, the pecuniary reward might have approximated in some degree towards an equivalent for the exertion it required. But from this more favored district, the Doctor and his already half exhausted horse were called upon to plunge into the broad spread, semi-desert region of the Pines of West Jersey, where it would be difficult to designate his long and solitary route, through primeval forests, almost impervious to the noon-day sun —through "Barrens," tangled and briery with scrub-oak and thorny vines, or stretching wide and far their plains of sand, where scarce a wandering bird could draw subsistence from the arid and steril soil. Yet, wherever there was found a human being to demand his professional aid, there would he find his way, by high-ways or by-ways, bridle path, blaze, blind-road, or no road at all!

Not unfrequently, the protracted absence of the Doctor on these distant excursions would occasion considerable alarm in his family; but when questioned, on his return, as to the cause of his delay, he would pleasantly reply: "Nothing in the world was the matter, only that I became lost for a long time in the Pines, and was compelled to lodge in the woods!" Many a night has this devoted physician passed in the manner just described: and after he adopted the use of the sulkey, he would fasten his horse, on such occasions, to a convenient sapling, then wrap himself in his cloak, consign himself unmurmuringly to the care of all-pervading Providence, and sleep, till morning light enabled him to escape from the meshes of the sylvan labyrinth. During the prevalence of epidemics, this wide extension of his range of practice, coupled with the great number of his patients, obliged him to remain constantly upon the road and in the sick-room, for days and nights together, without rest or intermission, until exhausted nature could endure no more.

During a period of about thirty years, the general amount of daily travelling performed by Dr. Hendry, was from thirty to fifty miles; but his journeys sometimes extended to the almost incredible distance of seventy-five miles in a single day; and the necessary rapidity of his movements on such occasions, was sufficient

to tire out four horses in succession. It has been computed that, during his entire career of professional usefulness, more than two hundred of these noble animals were completely exhausted in his service. With a practice thus enlarged beyond all example in this region of country, it becomes a matter of astonishment that human nature did not succumb beneath his vast and long-continued exertions: but Providence had blessed him with a capacity to endure fatigue and loss of sleep, beyond the powers of ordinary men—a capacity which might appear incredible if unconfirmed by testimony which cannot be disputed.

When, by a refined urbanity of manner, the conscientious discharge of duty, untiring industry, and the lapse of many years, a great public benefactor has endeared himself to whole generations of his grateful fellow citizens, “trifles light as air,” incidents and characters otherwise unimportant, or even ridiculous, often assume an unusual degree of interest by becoming embalmed in the memory of departed worth; as insects inclosed in amber are treasured among gems. In writing, as the biographer of Dr. Hendry desires to do, for the gratification of those who knew and loved him, it would be improper to pass by entirely without notice, two agents of his usefulness, who, however humble, became associated in men’s minds with the benevolent physician, and who, as sharers of his arduous labors, deserve our recognition. These are the Doctor’s favorite horse and the Doctor’s negro man.

Old Silver-tail has been already introduced upon the stage, as one of the heroes of the monster apparition. Many now living in West Jersey will have a kindly recollection of this most faithful animal. For a long course of years he was the last dependence of the laborious practitioner—the only one of all his numerous stud in whose selection and purchase he felt a pride. When, on occasions of unusual exertion, every horse in the stable had been successively exhausted, and still another “call” demanded prompt attention, old Silver-tail was tried again. This animal was a sorrel, so fiery and full of spirit that he received the cognomen of “Cayenne;” his more enduring title being derived, of course, from the peculiar color of his caudal appendage. By moderate computation, this invaluable animal performed at least forty thousand miles of travel in his master’s service, carrying upon

his back, or dragging in the sulkey, a weight of one hundred and eighty pounds. In cases of extreme emergency, when life or death depended upon immediate action, Dr. Hendry was a furious driver, and spared his horse as little as himself. The burden of the struggle against time then usually fell to the lot of Silver-tail; and nobly did the generous creature respond to the demand. Many a vigorous Jerseyman now lives, unconscious of the fact that a parent's life, and hence his own existence, are due, under Providence, to that old sorrel horse.

The immediate guardian of old Silver-tail was a colored man named John Fussell, who still lives in the enjoyment of the respect and kindly feelings of those who honored and loved his former employer. This long-tried and most faithful domestic, who was with Dr. Hendry in the days of his greatest prosperity and most arduous labors, was far from being confined in his sphere of usefulness to the stable and the menage;—he entered upon service when a mere lad, and continued in the family, as a house-servant and attendant upon the Doctor and his horse, for the term of twenty years; when he resolved to marry, and begin life in another sphere. In fact, the Doctor was often dependent upon John for the preparation of many of his prescriptions, under proper directions, during sickly seasons: he waited to answer calls in the office, and became associated in so many ways with the profession, that he acquired the familiar title of "Dr. John." For several years he was the only assistant in the office, and became quite expert in compounding medicines, and very naturally *considered himself* by no means without skill in actually prescribing for the sick. It is quite amusing to hear the old negro tell of the sufferings of "the Doctor and me," while engaged in such active practice. He now resides in a little cottage a few miles from Haddonfield, where he has maintained, for many years, the character of a firm and consistent member of the Methodist Episcopal Church, having been distinguished throughout life for undeviating honesty, veracity and general good conduct. To this day, an allusion to his former services in the family of his employer is sufficient to suffuse his eyes with tears of grateful recollection; and, if permitted to tell the story himself, it would appear beyond dispute, that no three individuals ever served the public with half the zeal of Dr. Hendry, John, and Silver-tail.

In an age when the duties of the medical practitioner have become divided into many branches; when pharmacy has been elevated into a distinct profession; and when, at least in the more thickly settled portions of the country, particular physicians are beginning to devote especial attention to surgery, obstetrics, the diseases of the chest, or the diseases of children; thus establishing peculiar reputations in some one or more departments of the multiform art of healing, the country practitioner is often able to divide or to escape entirely, an onerous responsibility in rare and difficult cases and unusual operations with the knife. By this means the difficulty of his isolated position and the labor of study in keeping pace with the advance of science, are essentially diminished. But no such alleviation of labor was possible with Dr. Hendry. In the morning, perhaps, he would be found engaged in the treatment of an important and difficult compound fracture; at noon, adding another young aristocrat to the republic; then, snatching a hasty dinner, relieving an attack of violent infantile convulsions in the child of a humble cottager, on his way to the bed-side of some etiolated fair one, retreating from the exhausting heat of the capital, with the hectic flush upon her cheek, to die among the flowers, and be buried where the birds might sing over her early grave: at the next moment we may follow him into a scene of terrible family affliction, to calm the ravings of the terror-stricken victim of *mania-a-potu*, so justly called "the horrors;" then rapidly dismissing half a dozen cases of the prevalent epidemic, and dashing off five-and-twenty miles into the pines, to usher into being an additional bread-eater, to encumber the already over-burdened board of some poor glass-blower at the furnace.

He was peculiarly fortunate in the department of obstetrics, which, previously to his time, had been almost monopolized for years by female *accoucheurs*; and certainly no other individual in West Jersey ever introduced into this world of toil and care, so many children, with so much honor to himself and ease to the mother and infant.

The number of severe cases of surgical injury occurring under the observation of the country practitioner, is rarely very great, and this very infrequency seriously interferes with the preservation of that habitual skill which cases of this character require:

but Dr. Hendry was equally distinguished in all branches of the art. It is much to be regretted that there exists no detailed record of the very numerous operations which he performed, from time to time, during his long course of practice; yet, evidence enough remains in the memory of his surviving neighbors, to show that many of them were difficult and dangerous—such as are sufficient, when performed in the great medical institutions of capitals and made public through the press, to establish an enviable reputation for the operator. But the subject of our memoir lived before the age in which a multiplicity of medical journals afforded the facilities for favor which are now extended alike to the practitioners of cities and the rural districts. Several successful applications of the trephine, in severe injuries of the brain, in which the skillfulness of the after treatment secured the lives of the patients, under highly unfavorable circumstances, are vividly recollected by many; and among the cases occurring near the conclusion of Dr. Hendry's career, were two of great severity, which possess peculiar local interest, because one, at least, of the sufferers still resides in our midst. Their history is as follows:

Among the military implements in the custody of Judge Clement, of Haddonfield, then the brigade inspector of the New Jersey militia, &c., &c., was a venerable piece of ordnance which had seen much service in the Revolution, and was now treasured as a relic under the title of "the old county cannon." On the 22d of February, 1829, great preparations were made in Haddonfield for the celebration of the birth-day of the Father of his Country; and, to crown the honors of the day, it was resolved that the old county cannon should thunder forth a national salute. The gun had passed its best days, and it was known that it would become unmanageable if heated by rapid and frequent firing; but the permission of the brigade inspector being obtained, the experiment was tried. Jeremiah Elfreth, with the present E. Clement, undertook the management of the piece, and it was repeatedly discharged. Captain J. B. Cooper, U. S. N., being present on the occasion, cautioned the gunners several times that unless they were more careful in re-loading, some serious accident would certainly occur; and his last warning was scarcely uttered, when, in consequence of some inadvertency, the piece went off premature-

ly, and both the gunners were prostrated upon the ground, then covered with snow, with their apparel in a blaze. They were severely burned from head to foot before the flames could be extinguished. Their limbs were frightfully lacerated, and their faces terribly injured. They were carried to a neighboring hotel, in a state of profound collapse from the extent of their injuries, and surgical aid was immediately called in requisition.

It has been already stated that this accident occurred towards the close of Dr. Hendry's career. Some time previous to this disastrous explosion, two young medical gentlemen, Doctors Thornton and Blackwood, had established themselves in Haddonfield, and were received by him with that peculiar kindness and refined politeness which formed such a striking feature in his character, through life. These gentlemen being at home at the moment, were first at the scene of distress; and Dr. Hendry returning soon after, from a visit at some distance, a thorough examination of the nature of the injuries took place. Clement was found to have lost his right arm, with several fingers of the left hand, and had also suffered a horrible wound of an eye; while in the case of Elfret, the eyes and body were severely injured, and the right hand carried away.

To the mind of the professed surgeon, these instances of complicated burns, fractures, and lacerated wounds attended with collapse, will present questions of the greatest nicety, and mooted points of doctrine, which still remain undecided by medical men of the highest eminence. They were calculated to test, in the fullest manner, the scientific abilities of the practitioner. Dr. Hendry was never known to shrink from any professional responsibility; his entire fearlessness being the result of his firm reliance upon those principles for the regulation of medical practice which he had adopted after mature deliberation and careful observation:—he advised immediate amputation, without waiting for re-action, as the only means of saving life, in either case; and the consultation yielding to his opinion, he proceeded to perform the necessary operations, by the request, and with the assistance of Doctors Thornton and Blackwood. He amputated the arm of Clement and the hand of Elfret, and afterwards continued his attendance, in company with the two junior practitioners. The result fully justi-

fied the reputation which Dr. Hendry had long enjoyed among his fellow members of the profession, as the most prominent surgeon of the western section of his native state. Both patients recovered from the effects of the operation, and their complex injuries, to the astonishment of the public and the professional attendants.

In the theory of medicine his conceptions were clear, correct, and decided, his tact in diagnosis remarkable, and his manners at the bed side firm, but in the highest degree kind, polished and condescending. He never refused to listen and reply with gentleness to the suggestions of ignorant attendants or over-anxious friends, but never receded from a principle, or modified a direction, from a disposition to yield to unwise pertinacity, or cultivate golden opinions at the sacrifice of duty; yet, probably, no practitioner ever enjoyed in higher degree, the confidence and the affection of his patients and the subordinates of the sick room. His clinical practice was rich in original prescriptions, the result of long continued observation and research, and his knowledge of practical pharmacy extensive and minute. With this profound and accurate knowledge of his profession, he was naturally an uncompromising foe of all species of quackery and empiricism. The sick room was for him a battle field and with the most chivalrous devotion he there assailed the foes of human health—glorying in the defeat of the enemy, and the restoration of the victims of disease.

How, in the midst of such engrossing professional labors, Dr. Hendry managed to keep pace with the progress of his profession, it is difficult to conjecture; but that he did so, with remarkable success, is not to be disputed. Some portion of his time, however intensely occupied, was regularly devoted to study. He was a subscriber to the principal medical periodicals, both foreign and domestic, and was always found prepared to converse and to act upon the scientific discoveries and professional improvements of the day.

Nothing can tend more strongly to substantiate the justice of this statement than the frequency with which he was called in consultation by the most prominent physicians of New Jersey, and the men of science of the country.

It will hardly be supposed that one so constantly borne down by the pressure of an enormous private practice, could find time for the performance of public official duties; yet, for many years Dr. Hendry had charge of the Gloucester County Alms-house; and many of the poor and suffering who were inmates of the institution at that period, continue to relate with feeling, his numerous acts of kindness and benevolence while visiting among them, administering to their peculiar wants, and rendering their condition as comfortable and agreeable as possible.

Another instance of his devotion to the public is exhibited in his consenting to serve as surgeon to a volunteer company of cavalry, formed in 1805, by the present venerable Captain J. B. Cooper, from the young gentlemen of Woodbury, Haddonfield and the adjacent country. The Captain being a general favorite, and the uniform peculiarly attractive, this company became very large, and continued in existence many years; during all which time, the Doctor never failed to parade with them, except when positively prevented by professional engagements.

In fact, the subject of our memoir, though so engrossingly engaged, found time to mingle freely with his fellow citizens, on all occasions proper for the physician and the gentleman. His attention was always fully awake to every subject affecting the interest or the morals of the community, and his conversation was rich in the varied knowledge befitting the accomplished scholar and the man of general information. His political opinions, though decided, were never blazoned abroad; he never entered into political contests; but, steadily performing his private political duties, and maintaining his right to individual judgment on such subjects, he suffered none to invade that right, and never invaded the similar rights of others. When questioned as to his partisan predilections, he would at once evade the issue by playfully remarking, "I am a Doctor—not a politician." To fill his station as a citizen, with dignity, and propriety, without compromising his character as a man, his feelings as a gentleman, or his professional usefulness, was his determined resolution; and so nicely was this end accomplished, that those of the most opposite politics felt no disposition to impugn him for his political faith. His standing

throughout all West Jersey was perfectly favorable to his elevation to any office in the gift of his very numerous friends, but he preferred remaining simply their physician; and the only instance of departure from this rule, is a proof of his disinterestedness. He served for many years, and at considerable sacrifice, as a director of the State Bank at Camden.

Once only, in his life, did he enter into a political canvass, and the result is characteristic. The first effort to remove the county seat from Woodbury to Camden, was made during the life-time of his father; and at the earnest solicitation of his parent, whose interests centered in Woodbury, he was induced to exert his influence in opposition to the contemplated change. How adroitly and effectually he accomplished the delicate task let the sequel show!

On the day of the election, the Doctor lent horses and carriage to a neighbor, whom he supposed to be warmly engaged on the same side of the question, to convey voters to the polls. All that morning, the said horses and carriage were busily employed in bringing *Camden voters* to the ground! At noon, however, the neighbor became conscience stricken; and seeking the Doctor, he candidly confessed the trick, and apologized by saying, "it was but a joke." The Doctor's reply was an admirable proof of his habitual self-command: with perfect good humor he remarked, "My dear Sir, it is a capital joke; but—*never tell it again!*"

In religion, as in politics, Dr. Hendry cautiously avoided those controversies which, without benefiting any one, might have lessened the sphere of his professional usefulness; but he was never backward in the simple statement of his faith, when courteously questioned upon this all-important subject. On this point he remained conscientiously firm, even when, in the opinion of many, his temporal interest was deeply involved; that is, he never accommodated his mode of address or language, to the religious peculiarities of those with whom he was professionally connected. His freely avowed sentiments were those of a Churchman; and, through life, he manifested, on all proper occasions, a decided preference for the Episcopalian service, over any other mode of Divine worship; but he was no sectarian; being sufficiently charitable to allow that every human being should be permitted to

approach his Creator in the manner dictated by his own proper conscience. He never attempted to prescribe any form of religion to others; and he mingled freely with those of every religious persuasion, while conforming punctilioiusly to the forms and usages, and uniting sincerely in the prayers and regular service of his own Church. For the Society of Friends, many of whom were ranked among his deeply valued associates and most intimate acquaintances, he always entertained the highest esteem; but Dr. Hendry was by far too cultivated in taste, and consistent in principle, to imitate the custom of those who, with no doubtful purpose, adapt, or awkwardly endeavor to adapt their language and manners to the singularities of that very peculiar body of Christians. The Society of Friends contains an unusual number of men of cultivated minds, sound judgment, and reflective habits; and its members very properly regard as highly offensive, if not openly insulting, the assumption of its peculiar habits, by those with whom they result, not from faith in their propriety, but from a sinister and contemptible policy. Dr. Hendry was a gentleman, and could not stoop to vulgar arts. His unvarying popularity with both divisions of the sect, notwithstanding his constant professional association with all parties during the recent schism, is honorable alike to him and them.

We have now completed a rapid and faintly colored sketch of the professional labors of Dr. Hendry during the active period of mature manhood. Other illustrations of their nature and extent may be presented in discussing the true causes of his unbounded popularity, but it is now time to review the history of the decline and termination of his long and useful career.

The natural consequence of the excessive and continual exertions of this self-sacrificing public benefactor was, the access of a premature old age; and, as an additional evidence of decay, he was attacked with that dreadful, and, at his age, hopeless affliction—epilepsy, so frequently fatal not only to the physical, but also to the moral faculties;—leaving the strongest and most brilliant intellect to flicker for a little while, fitfully gleaming like an expiring lamp, until quenched by the tears of mental imbecility. The hitherto firm constitution of Dr. Hendry began to be “broken up,” under the continued assaults of this terrible enemy; the ro-

bust frame became enfeebled, the manly countenance gradually lost its vigorous expression, and the noble and towering form, its majesty and grace; but it was not until the epileptic attacks were renewed with constantly increasing violence for several years, that the intellectual faculties of the victim began to yield. His powerful constitution wrestled long and energetically with this frightful disease, and all the medical ability of his distinguished and ardently attached collaborators in the professional field was brought to aid it in the desperate struggle; but, in vain! The termination of a medical career of unprecedented usefulness and honor was close at hand!

Until this fatal illness, Dr. Hendry had never been known to travel for recreation or amusement; but now, his excellent friend and attentive physician, Dr. Spencer, succeeded in inducing him to pay a visit to the city of New York, for the benefit of change of scene; and his physician bore him company. In that city, he became the honored guest of Dr. Spencer's particular friend, the late Major Gamble, U. S. A., of whose genuine hospitality he retained a pleasing remembrance until death, ever mentioning the subject with feelings of gratitude and delight. The visit had the effect of cheering the Doctor's mind, but permanent relief was beyond all human art.

The absolute necessity of relinquishing the practice of his profession became daily more apparent, and an effort was made to settle his temporal affairs. In this undertaking, his friends encountered difficulties productive of most painful feelings. Instead of being a man possessed of vast riches, as many, recollecting his extensive practice, naturally supposed, he was found comparatively poor! His liberality on all occasions, but more especially the neglect of his account books, and the collection of just debts, resulted in this state of his affairs at last! No remedy could be applied; the time and opportunity were gone, and thus, the condition of his pecuniary circumstances became the proudest monument of his life-long and self-sacrificing liberality.

Though Dr. Hendry may have been carried by his charitable feelings, in some instances, beyond the bounds of reasonable benevolence, we would shield his memory against the charge of weakness or folly in monetary affairs. The condition of his finan-

ces was the result of far nobler causes, among which may be mentioned a total unwillingness to allow personal considerations to interfere with his first and paramount mission—the healing of the sick. At many periods of unusual public distress, the vast extent of his practice rendered utterly impossible the very record of his services. There was literally no time for the regulation of accounts. Thus, during the typhus epidemic of 1821, he kept four horses constantly employed. The value of his practice at that time was fairly estimated at seven or eight hundred dollars per month; yet for four consecutive months he did not put pen to paper, or attempt the entry of a charge!

But his pecuniary resources were not curtailed solely by his strict attendance to what may be termed ordinary professional duties, rendered excessive by the extent of his practice. His direct charities were liberal to the last degree; a very large share of his services in every stage of life was rendered gratuitously by intention; and he expended a handsome fortune in the free supply of drugs to the families of his patients, in moderate circumstances, together with other comforts, such as food, clothing, and occasional pecuniary aid to those who were decidedly poor. These blessings he distributed with a liberal hand, and with a truly Christian avoidance of display. He carried with him, into the more serious scenes of professional life, the finest feelings of the human heart, and even when most fatigued, the thought of pending cases of extreme illness or danger, would often deprive him of sleep.

A single instance will suffice to show how constantly his high responsibilities engaged his mind by night, as well as day. His widow related that upon one occasion the Doctor returned about midnight from visiting a patient, and retired to bed: but he lay very restless and uneasy for about an hour, when he suddenly arose, called for his horse, and prepared to go out. A furious storm was raging at the time, and the night was intensely dark.

"Why, Bowman," inquired Mrs. Hendry, "where are you going? I have not heard you called:—and on such a night as this!"

"I have been reflecting upon the case of Mr. A.," replied the Doctor; "he is extremely ill, and has a large family dependent upon him for support: if he dies, they must be thrown upon the

cold charity of the world. I have just thought of something which may possibly be of service. If I do not go, and administer the medicine, I cannot be satisfied."

He departed immediately, in the midst of the storm, and rode about seven miles, in the profound darkness, to the residence of Mr. A. About daylight, he returned, and said: "Mr. A. is better. Give me an early breakfast: I must return again!"

* * * * *

One of the noblest proofs of Dr. Hendry's genuine goodness of heart and religious regard for his professional duties, is found in the fact, that no degradation in the social or moral scale could remove the sick and suffering beyond the pale of his benevolence and sympathy. From a host of similar examples, let this one suffice:

Mr. C., of Timber Creek, relates that, on one occasion, the Doctor attended a family of negroes, resident about seven miles from Haddonfield, who were afflicted with typhus fever. Mr. C. informed him that his patients were utterly worthless beings, a disgrace to the neighborhood, and a set of notorious thieves; but this information produced no relaxation in the Doctor's efforts for their relief. He felt himself not the judge, but the professional guardian of these miserable victims of the triple terrors of poverty, disease and vice. His attendance was continued daily, in all varieties of weather, and every member of the family was separately, minutely, and carefully attended, until all were restored to health. During all this time, he not only supplied them gratuitously with the necessary medicines, but caused them to be furnished from a neighboring store with all the common necessities of life, at his own individual expense.

There can be no doubt that this noble generosity has frequently subjected Doctor Hendry to considerable losses, through the base cupidity and designing villainy of the unprincipled; but, even when fully exposed, such cases failed entirely to check the current of his kindly feelings; as the following thoroughly authenticated instance will prove beyond dispute:

The present Judge Clement, of Haddonfield, always a firm friend of Doctor Hendry, one day called upon him, and intimated that he ought forthwith to commence a suit at law against certain individuals deeply indebted to him for several years of unrequited

medical attendance; stating that they were in the act of packing up for a removal to the western country. The Doctor objected—the judge remonstrated; assuring him that the parties were perfectly able to pay, and that, to suffer them to escape with impunity, would be encouraging an unpardonable proceeding on their part, and an open injustice to himself and family. At length, the Doctor yielded a reluctant consent, and, accordingly, the usual legal process was promptly issued.

About noon on the day for the return of summons, the delinquents arrived at the residence of Dr. Hendry, and informed him that they had each been sued by him! This was indeed a novel and most embarrassing position. He apologized most feelingly for the inconvenience he had occasioned them, gave each the necessary funds to pay the costs, insisted on their dining with him, which they did, and then politely dismissed them, with his best wishes for their future prosperity and happiness! Meantime, the magistrate, Judge Clement, was patiently awaiting the appearance of the respondents, with a full determination to secure the Doctor's fees; but they, not wishing to disturb him, immediately withdrew within the limits of a neighboring State, and left their hospitable friend to pay the costs a second time.

On meeting the judge soon after, and hearing his indignant expressions of amazement and regret, the Doctor replied, in a deprecatory tone, "My dear Sir! They assured me they would send the money from the West." And he believed them!

Although the temperament of Dr. Hendry was ardent, and his feelings quick and strong, yet his self-possession was admirable, and it was never known to fail under the thousand provocations inevitable in the routine of medical practice. A striking example of his equanimity under such annoyances, occurred during the severely cold weather of 18—. On this occasion he was summoned to a case of compound fracture of the thigh, at Marshall Glass-works, distant fully twenty-five miles from Haddonfield. Before he had completed the necessary dressings and placed the patient in a comfortable situation, a most violent snow storm had commenced, and through the whirling drift, he was compelled to return by night. At daylight the next morning a messenger arrived in haste, informing him that mortification had taken place;

the limb had become black, and he must return to the Glass-works as speedily as possible. The snow was now two feet deep upon a level, between the drifts; but the Doctor, thinking that, possibly, the dressings might have interrupted the circulation in the limb, did not hesitate a moment, and the entire day was occupied in laboriously floundering, with his horse, along the unbroken road, to the cottage of his patient. Upon examining the limb, all things were found in perfect order; and on his inquiring for the individual who had made the supposed discovery that the limb was mortified, a messenger went forth to call him. Presently the author of this sage diagnosis presented himself, in the shape of a stout wood-chopper, from the forest, with his axe under his arm.

"My dear Sir," said the Doctor, approaching and gently tapping the man upon the shoulder, "you had better, for the future, confine yourself to the axe, and let surgery alone. You see what a long and painful journey you have occasioned me to make—and for no cause whatever!"

The man stood confounded more by the kindness of the Doctor's manner than even by the grossness of his own mistake. The physician, unirritated by the ignorance that cost him so much labor and even impugned his professional skill, conversed a while with his usual calmness, pleasantry, and affability, and, after a night of rest, set out for home, as cheerfully as if nothing had occurred to ruffle or annoy him.

It may be reasonably supposed that one so generous and noble in the performance of all his duties, both professional and civil, must have escaped all injury from the operation of the darker passions of humanity; and truly, no man ever enjoyed more warmly the attachment of his friends, who, when they were once acquired, were friends for life; but alas; no man, however serviceable and free from blame, can live for many years in contact with society, without sometimes suffering wrongs, and acquiring enmities.

While in attendance on the wife of a Mr. A., the life of Dr. Hendry was several times endangered by the attacks of a furious dog, belonging to the husband. The Doctor had requested him to chain the animal; but, on his next visit, the vicious beast came very near injuring him severely; and was prevented from so doing solely by the accidental interference of a hired man.

The Doctor, seated in the house, which he had reached with difficulty, sent for Mr. A., and thus addressed him: "Sir; I find you have more regard for the comfort of your dog than for my life; have the goodness, therefore, to select another medical adviser, as I am not willing to jeopardize my life daily, and shall discontinue my visits." He then calmly arose, bid the gentleman good morning, and departed.

Mr. A. considered this proceeding as a grievous insult; it terminated all intercourse between the parties; and, judging from the countenance of the offended gentleman on many occasions, the recollection of this outrage still influences his feelings toward the second generation.

Another instance of offence, leading to injury of proportionally still deeper hue, furnishes us with an opportunity of vindicating human nature in describing the consequences of the crime: and gladly shall we turn from the narrative of that which is degrading in our nature, to the contemplation of a picture of affection and gratitude, so much more in accordancet with the character of the deceased, who, on this occasion, was the subject, not the actor, in the display of those lofty excellencies.

After the marriage and departure of his faithful servant John, whose merits have already been commemorated, Dr. Hendry employed another colored man to take charge of his horses and perform certain other duties in the family. This man became offended with the Doctor, and was subsequently discharged from his position. In revenge for the supposed injury thus inflicted, the negro set fire to the establishment; and the out-buildings, the barn, two valuable horses, a quantity of grain and hay, with many other articles were given to the flames. This deed of villainy was executed at about nine o'clock in the evening; and so well laid were the plans of the incendiary, that the most prompt and active exertions of the villagers and farmers from the neighborhood failed to arrest the progress of destruction. All that could be accomplished was, the saving of the dwelling-house and neighboring buildings.

So highly were the people incensed at this dastardly act, that, had the negro been found at the time, he probably would have shared the fate of the unfortunate animals who were the victims

of his revenge. Immediately after the fire, a meeting of the Doctor's friends was called, at which it was resolved that the property lost by the conflagration should be restored by public effort. A subscription was circulated, by which means the necessary funds were promptly raised, and a committee was appointed to superintend the re-erection of the barn and other buildings. This self-imposed task was immediately commenced. Persons of all classes of society vied with each other in the work of reparation; and, in a few weeks, the labor of affection was complete; a new barn arose, phoenix-like, from the ashes; the new out-houses were finished and ready for use; hay and grain filled the appropriate receptacles; two capital horses occupied the stalls; and Mr. Joseph Burrough, a member of the committee, was deputed to visit the Doctor, and inform him of the fact.

The interview was touching in the extreme. Mr. Burrough stated that the task of the people was completed, and that they hoped he would accept the offering as a testimony of the esteem of his neighbors and friends. The Doctor clasped his hands and attempted a reply. "My dear Sir," said he, "words cannot express my feelings! I thank you all—you will understand me!" He could say no more, but retired to an inner apartment, to give vent to the emotions which overpowered his utterance.

Dr. Bowman Hendry died of epilepsy, on the 23d of April, 1838. His remains were interred in the family burial place, in the ground attached to the ancient Episcopal Church, of Coles-town, Camden county, New Jersey; and the place where rest the mortal remains of this invaluable public servant, this model of practical Christianity, and pattern of God's noblest work, is designated by a marble slab, with this unostentatious superscription:

SACRED
TO
THE MEMORY
OF
BOWMAN HENDRY, M. D.
AGED 62.

ORIGINAL COMMUNICATIONS.

CASE OF TRAUMATIC TETANUS SUCCESSFULLY TREATED.

By S. C. THORNTON, M. D.

During a practice of twenty-eight years, I have had the misfortune to lose all my cases of traumatic tetanus, and was almost ready to conclude that a genuine case of this terrific disease was never cured, and that those physicians who asserted that the malady was within the control of remedial agents, must have been mistaken in the character of the disease. The following brief history of a case, will, however, disprove my former conclusions, and will aid in establishing the fact that tetanus may sometimes be cured; while it may afford additional testimony in favor of the use of the vapour of sulphuric ether, in those diseases where the nervous symptoms preponderate.

CASE.—On the morning of the 12th of July last, I was called to see J. T., a stout, robust Irishman, of sanguine temperament, and in the 24th year of his age; the tetanic symptoms were the result of an injury on his foot, occasioned by wearing a tight boot; they were very well developed, and the whole system participated in the peculiar spasmoid symptoms which characterize the disease. I immediately took from his arm twenty ounces of blood, and directed hyd: chlorid: mitis: grs. x, every two hours, and morph: sulph: gr. $\frac{1}{2}$, every three hours, to be continued till my next visit. In the evening I saw him again, and directed the spine rubbed with pure potash, and to be covered with a blister extending from the nape of the neck to the os-coccyx, and to continue the calomel and morphia. The agonies of the patient were now extreme, severe spasms occurring every twelve or fifteen minutes. To allay these, chloroform and sulphuric ether were administered, and directed to be given alternately every hour during the night, in limited quantities, if circumstances should require it. The

moment the patient came under the influence of the ether, he cried out "I am easy now." The paroxysms were not only moderated, but the intervals between them were much longer, so that the poor patient already experienced some relief. Nearly an hour would sometimes elapse between the paroxysms. He was ill for two weeks, during which time he would occasionally suffer from his tetanic symptoms, but good nursing and a steady perseverance in the remedies finally relieved him. The calomel was continued for the first four days; after that, reliance was principally placed upon the sudorific effects of the morphia and the anesthetic agents which have been named. He took four hundred and ten grains of calomel, (by which he was freely purged and salivated,) twenty five grains of morphia, consumed twenty-eight ounces of sulphuric ether, and eight ounces of chloroform, and I really think it was not wasted, for he was well nursed; so you may see an Irishman is not to be poisoned by ether or chloroform, calomel, morphia, or pure vegetable caustic—for he is now well.

REMARKS ON THE TREATMENT OF PSEUDO-MEMBRANOUS
LARYNGITIS.

BY THE EDITOR.

Among the diseases of childhood, there is probably none which has excited more attention and solicitude, than that usually known as membranous croup. Having in the early part of my practice met with several cases which terminated fatally, and an opportunity being thus afforded of making repeated post-mortem examinations, the result of these observations, and of the practice subsequently adopted, are freely communicated. The disease was considered one of high inflammatory action, and treated as such; hence, local and general depletion were resorted to, to relieve the inflammation, and emetic and mercurial remedies freely employed to meet their separate indications. By some it is now considered judicious practice, to bleed copiously from the arm, even where very young children are our patients; to commence imme-

diately afterwards with antimonials, blisters, and local depletion. It is acknowledged, however, that the disease is proverbially fatal; it has not yielded to the ordinary treatment; the heroic system of bleeding, purging, vomiting, blistering, &c., has not proved equal to the insidious enemy against which it has been arrayed, and though men who stand at the summit of professional eminence may lose their patients without loss of reputation, younger members of the profession cannot so well withstand, in their early career, the proscriptive course pursued by the enemies of our profession, or the suspicions of parents or friends, that all the means of our art were not faithfully applied; and yet the practitioner in review of his course, may console himself with the reflection that every thing was done; the lancet was brought into requisition to subdue the inflammation, emetics were employed to throw off the false membrane, counter irritants were applied, to invite the diseased action to the surface, the warm bath was resorted to for the purpose of relaxing the system, tartar emetic was given freely to moderate the circulation; and all the collateral remedies within the sphere of our knowledge, were brought to bear in the treatment. If these have all proved unsuccessful in the best hands, and in a majority of cases, we are justified in resorting to remedies more mild and palliative in their tendency, as the result cannot be worse.

The post-mortem appearances of two cases which came under treatment about the same time, and died within a few days of each other, will be briefly presented. The first was a child about four years of age, in which the peculiar respiration, loss of voice, and other symptoms were well developed; there could be no mistaking its character—free depletion was at once resorted to, and the child put upon the use of calomel and tartar emetic, in divided doses, repeated at intervals of an hour, the warm bath was freely employed, oil of turpentine rubbed upon the throat, with aila-ceous poultices to the extremities. Free emesis was induced whenever the dyspnoea became alarming, but the disease went steadily on, the symptoms abating but for a short time, and a dreadful death terminated the sufferings of my little patient, in less than a week. At the same time I was visiting a child about 18 months old, with my friend, the late Dr. Isaac S. Haines. The same

course of treatment was pursued, the symptoms being similar, feches were twice applied to the throat, and counter irritation established upon the chest. It died also—extreme restlessness and anguish preceded the hour of dissolution, the countenance becoming livid, and expressive of intense suffering. In the first case; an examination after death revealed the following appearances—slight redness of the fauces, with a false membrane lining the whole track of the respiratory passage from the glottis to the bronchi; it was a perfect tube adherent in some places, but loose in others, the whole of the larynx and trachea were removed, with a portion of the bronchial bifurcation, and the specimen preserved. It is now in the collection of Prof. Pancoast, of the Jefferson College, Philadelphia. The membrane was tough and leathery, not at all vascular—there was slight engorgement of the laryngeal vessels, and a partial congestion of the lungs. In less than sixty hours afterwards the remains of the second child were subjected to our inspection, and what was our surprise on finding not the slightest membraniform exudation in the whole course of the respiratory tube—the lungs gave us their usual crepitant sound; the larynx and trachea were unobstructed, while a slight secretion of mucus covered the boundaries of the glottis; but there was nothing in this secretion that gave evidence of its being any thing more than the natural fluid which is furnished by the follicular glands of the part, for the purpose of lubricating the chordæ-vocales. In fact, there was no evidence of violent disease, and yet the patient died in the same manner, and went through the same symptoms as in the first case. The idea immediately suggested itself that there must have been a violent spasm of the glottis, or of some portion of the trachea, in order to create a train of symptoms so alarming and fatal. Since that period, five cases of the disease have come under my care; one had been treated by an irregular practitioner for several days, according to the sweating system, and died shortly after I saw it. The other four recovered—they were not bled, generally or locally—the treatment was alterative and palliative. In two instances the false membrane was discharged in separate pieces, retaining its tubular form, but soft and easily broken. In the other two there was no appearance of membrane in the matter vomited or evacuated by stool. The treatment employed was as follows:

Directions were given that the patient should be kept in a room of moderate and equable temperature, and small doses of calomel (regulated according to the age of the child) given at intervals of an hour apart, until the bowels were freely moved. After free catharsis, small portions of Dover's Powder or Ipecac. were added to the mercurial, with a view of producing the diaphoretic and anodyne action of the one, and at the same time of promoting the alterative effect of the other. While these remedies were being sedulously administered; the direct application to the diseased surface, of a solution of nitrate of silver in the proportion of a scruple to the ounce, was made every two or three hours, by means of a probang. Even if the attendant does not succeed in penetrating the larynx with this instrument, the action of the remedy is conducted by sympathy along the mucus membrane which lines the larynx and trachea, and in this way proves serviceable. Where there was much nervous disturbance, assafetida injections were administered with decided advantage. We have seen a child restless with suffering, speedily quieted by this remedy. When the membrane becomes detached from the walls of the trachea, which may be known by the rattling sound produced in respiration, a simple emetic of Ipecac; or sulphate of copper, was administered to throw it off.

This mode of treatment was adopted from a supposition that the true pathology of the disease is different from that generally received as correct. The depletory plan would certainly be more successful if the disease was one of a purely inflammatory character; but as the treatment indicated by the presence of inflammation is unsatisfactory, it is fair to conclude, that this view of its pathology is not correct. The membrane appears to be an exudation from the blood, differing in some respects from an ordinary lymphatic deposit, and not to be arrested in its formation by abstraction of blood alone. If the treatment detailed, proves to be successful after a more extended trial, it will be also fair to conclude that the specific action of mercury is necessary to arrest the tendency in the blood to the formation of the adventitious substance which so peculiarly belongs to this disease. I am free to admit that the cases cited above, were presented under the most favorable circumstances; they were seen in the early stage of the disease, and every direction was carefully carried out

by the attendants. Constant watching and faithful nursing, contributed greatly to the success of the remedies employed, and yet there were cases in which the symptoms of membranous croup were fully and decidedly marked, and in which they increased in severity, until the system yielded to the mercurial impression. While calomel and nitrate of silver may be justly extolled as the most potent remedies in this disease, those medicines which rank under the class of nervous stimulants, usually called anti-spasmodics, deserve a conspicuous place in the catalogue of remedies, and we would urge upon the profession the importance of considering their claims to notice, in the treatment of this fearful malady.

REPORT OF A CASE OF PUEPERAL PERITONITIS AND HYSTERITIS, SUCCEEDED BY PHLEGMATIC DOLENS.

BY D. B. TRIMBLE, M. D.

Mrs. A. aged about 28 years, of a leuco-phlegmatic habit, was delivered of twins, after a tedious labor, on the 15th of July. I had been called to see her three times within the preceding month: the first time, on account of severe cephalgia, of an intermittent character, accompanied with some uneasiness in the loins. Her pulse being pretty full, I took about twelve ounces of blood from the arm, and in about an hour after, the pains in the head ceased, and became regular in the back. After remaining a considerable time, and finding the os-uteri undilated, I administered an opiate, and left her. The pains in the loins gradually abated, and next morning she appeared entirely relieved. Twice after this, at intervals of a week or ten days, she sent for me, when the uterine contractions were so strong and regular as to induce me to think that labor had commenced, the os-uteri being slightly dilated. On the 15th of July she was delivered of two boys, and though the labor was tedious, there was no difficulty in removing the secundines, and she appeared to be doing well up to the 20th, when she was taken with severe pain in the uterine and abdominal re-

gion, and when I saw her, (about 12 o'clock, M.) I found her suffering severe pain, particularly in moving, or on pressure in the abdomen, which was considerably tumefied. The lochia was entirely suppressed, and the secretion of milk diminished; retention of urine, and the pulse fuller and more accelerated than usual. I bled her freely, administered a full dose of ol: ricini, and had warm stimulating fomentations applied to the abdomen. At 6 o'clock, P. M. I called again; the swelling of the abdomen had greatly increased, together with the tenderness; there was considerable dyspnoea; the pulse was soft and small, but frequent. She was reclining with her shoulders elevated, her knees drawn towards the body, so as to relieve the tension of the abdominal muscles; she was larger than before her delivery; and her countenance was expressive of great anxiety and suffering. The castor oil had had a moderate effect, and I then prescribed the following R.—Pro: Chl: Hydrarg: gr. xii. } Div. in Poly. No. iv—one to be
Poly. Opn. gr. iv. } taken every two hours. I also directed 40 leeches to be applied to the abdomen below the umbilicus. 21st. Found her rather more comfortable, though still oppressed in her respiration; abdominal tumefaction slightly abated, though the tenderness continued unmitigated. Pulse moderately tense, and frequent; continued the calomel and opium; applied a large epispastic over the abdomen. 6 o'clock, P. M. Free alvine evacuations of dark bilious faeces, affording some relief to the pain. Considerable moisture on the skin; swelling somewhat decreased, pain less acute, dyspnoea partially alleviated. Directed ol: ricini 1oz. ol: terebinth 1dr. to be given at a draught. 22d. Symptoms improving, but the pulse being full, more tense and frequent, I ventured upon abstracting more blood, and took about ten ounces from the arm. Prescribed calomel and opium in the proportion of 1 gr. of each, every three hours. Had thin emollient poultices applied over the whole abdomen, which appeared to give considerable temporary relief. About an hour after this bleeding she became very much prostrated, and I was compelled to give her stimulants, viz: wine whey and aq. ammonia. She rallied in the course of 5 or 6 hours and was much relieved. 23d, 8 o'clock, A. M. much better; less abdominal tenderness; less difficulty of breathing; pulse softer

and slower. Directed the castor oil and spts. turpentine to be repeated, which procured copious tar-like discharges. With the occasional administration of a grain of opium, a gentle purgative, light diet and cooling drinks, she was becoming rapidly convalescent, when she imprudently left her bed, and was suddenly taken with severe pain in the right groin, followed by rapid enlargement of the thigh and leg of the same side, accompanied with great suffering. There was no discoloration of the limb, and it presented a glossy appearance. By giving her supertart: potass: pulv: da-
veri, the application of a blister to the thigh, and the persevering use of the camphorated oil, the swelling gradually abated, and she eventually under the use of an unirritating, nourishing diet, and for a short time, mild tonics, recovered her usual health, with the exception of the enlargement of some of the superficial veins of the leg, which continues somewhat swollen.

From the foregoing description of this case, I think it will appear evident that there was considerable uterine irritability, and a tendency towards inflammation, prior to delivery; and that the swelled leg was the consequence of the inflammation. The condition of her pulse rendered me cautious in the abstraction of blood, and somewhat doubtful whether it would not terminate as puerperal fever; and I was alarmed at the prostration produced by the second bleeding, though gratified afterwards by the great relief it afforded. This is the fifth case of combined péritonitis and hysteritis that I have had in my practice, and the same general course, viz: blood-letting, blistering, calomel and opium, has been successful with them all.

Oct. 2, 1848.

**A CASE OF PROTRACTED AND DIFFICULT LABOR, FOLLOWED
BY LESIONS OF THE BLADDER AND VAGINA.**

By J. S. SMITH, M. D.

Towards the close of the winter of 1847, I was called to attend M. C., a very small, but muscular Irish woman, aged 28; in labor with her first child. I found her with the os-uteri nearly dilated, the head firmly engaged in the superior strait, and tolerably ac-

tive pains. This was in the morning; and it was not until the afternoon of the third day that she was delivered. The cause of this was evidently the disproportionate size of the pelvic straits, with the child's head. Three several attempts were made to deliver with the forceps; and though I succeeded in passing one of the blades with difficulty, to near its proper position; yet I found it impossible to enter the other without using an unwarrantable degree of force. Most of the time the head lay in the cavity of the pelvis, favorably presenting at the inferior strait, yet firmly wedged and immovable; the pains gradually decreasing, and becoming insensible to the usual stimuli. In this condition of affairs, the prospects for my patient seemed any thing but encouraging, and as I felt pretty well satisfied the child was no longer living, I resorted to cephalotomy. My only implements at hand for operating, were, a gum lancet, and a small pair of pincers furnished by the house. It was a three hour's operation; and in fact I never worked harder in my life; the cranium having to be taken away in fragments, before the head was sufficiently reduced to allow it to pass. It took me a good half hour afterwards, to bring the body away. The child was of the ordinary size, and well proportioned.

The uterine contractions having nearly ceased, and the cord having been accidentally ruptured, the placenta was brought away by entering the uterus. My hand, though a small one, was tightly compressed in its passage through the pelvic straits, though I could discover no deformity.

My patient bore her sufferings with much fortitude, and under the circumstances seemed to be doing well; but towards the close of the second day, some fever symptomatic in character, set in, and the vaginal discharges became slightly fetid. Attributing this to a portion of the membranes which had not come away, and not apprehending any thing, as she did not complain much, and being otherwise much engaged, I did not see her for three or four days. By this time however, the soreness of the vagina, and fetid discharges, now to a considerable extent purulent, had much increased. In addition to this, a stillicidium of urine had commenced; which inflaming the vulva and neighboring parts, rendered her condition very uncomfortable. The constitutional symptoms

however, still continued mild. Anxious to ascertain what the real condition of affairs was, I desired an examination, but as the slightest touch gave her agony, I had to desist. From this time she slowly recovered; the soreness and purulent discharge gradually decreasing, and the fever subsiding, but the urine continuing to flow as before.

In about a month I made an examination; immediately beyond the entrance, my finger came in contact with an irregular, roughened cicatrix, which closed all further passage into the vagina; appearing in fact to be a general coalescing of its walls. Passing upwards, and behind the symphysis, instead of the usual rugæ, was a passage leading through an orifice, with a well defined sharp edge, of circular form, about the size of the finger tip, and terminating in a cavity. To satisfy myself fully, a probe was passed up the urethra, and at the distance of an inch, came in naked contact with the finger. This then was the condition, a perforate bladder, and a closure of the vagina. In due time my patient was about, as lively, active, and apparently as well as ever; only inconvenienced by the constant urinary discharge. Sometime after, I consulted Professor Hodge, of Philadelphia, on her case, but got little encouragement. In the following autumn, three menstruating efforts seemed to be made at the regular periods, but without the usual discharge. At the fourth effort, it came on, and has continued regularly since. At my desire, she consented to another examination; and on the right side of the vagina, was discovered a small passage, about the size of a quill, leading backwards, and which must have been connected with the orifice of the uterus. All else seemed firm and unyielding, and in the same condition as before. Whether this passage existed entire at first, I cannot say, but think not.

My remarks shall be limited. The question presents itself, whether the lesions produced were caused by the ill directed use of the forceps, or the too long continued pressure of the child's head, impeding the circulation, and destroying the vitality of the contiguous soft parts. In answer, I state, that I have repeatedly used those instruments, and always with a happy result; and in their application, I have ever considered that caution is the better policy. Besides, it was only in the posterior part of the pelvis

that an entrance could be made, the lateral and anterior parts so firmly embraced the head, as to prevent any. The latter can then be the only cause of the injury to the bladder, since no instrument came near it, and the stillicidium of urine did not begin for several days: and as respects the vagina, having stated the facts, the reader must draw his own conclusions.

I have but little confidence of her being much benefited by any treatment, and have advised her accordingly; as her general health is good, and time has somewhat reconciled her to the inconvenience she labors under. In conclusion, I will merely mention, that, though this has been an interesting and instructive case to me, I should be sorry ever to have a similar one.

BIBLIOGRAPHICAL NOTICES.

Summary of the Transactions of the College of Physicians of Philadelphia, from April 4, to August 1, 1848, inclusive.

It is to be regretted that the valuable papers contained in the various numbers of the periodical before us, are limited in their circulation, mainly to the members of the College, and those who receive them by exchange. It is for this reason, that we are induced to make copious extracts from its pages. The present number is mainly occupied with an elaborate report by Dr. Condie, on the diseases of Children.

A detailed history is given in this report, of an epidemic which prevailed in some districts of Tennessee and Mississippi, the symptoms of which prove it to be identical with the epidemics of cerebro-spinal-meningitis, that have prevailed in different portions of Europe. "It was principally confined to children between the age of six and fifteen years. The attack was ushered in by a sensation of chilliness, followed by moderate heat of the surface, and pain, commencing between the shoulders and extending to the occipital region, with rigidity of the posterior cervical muscles, retracting the head considerably backwards. Delirium supervened in an hour or two, with contraction of the pupils of the eye, or sometimes dilatation of one pupil and contraction of the other; ptosis of the eyelids; ecchymosis under the eyes and on the surface of the body; rigidity of the abdominal muscles; spasmodic twitchings of the flexors of the extremities, and a disposition to a constant motion of the legs from side to side, alternately. There was difficulty in expanding the lungs, respiration chiefly through the nostrils, constipation, and sometimes retention of urine. Stertorous breathing coming on, death soon closes the scene. The disease runs its course in from fifteen to seventy-two hours."

A variety of treatment was employed—bleeding, emetics, cathartics, mercurials, blisters, opium, quinine, and stimulants; but three-fourths of the cases terminated fatally in Tennessee, and five-

sixths of those who were attacked in Mississippi, died. In general, death occurred in from six to twenty-four hours after the attack. The post-mortem appearances of a single case are thus described by Dr. White of Tennessee: "The body was not emaciated, a half an inch of fat covered the abdominal muscles. The posterior integuments of the head were swollen; both pupils dilated; on removing the calvarium, a considerable amount of blood flowed from the sinuses of the dura mater. The arachnoid membrane adhered with moderate firmness to the surface of the convolutions; whilst removing the brain from two to three ounces of clear transparent serum escaped from the ventricles. The brain appeared heavier than usual. The surface of the convolutions was much flattened. The base of the brain bore evident marks of inflammation. The membranes covering the medulla oblongata and the cerebellum, the right lobe more especially, were thickened and opaque, adhering, likewise pretty firmly to the fissures of Sylvius. The membranes at the base were unusually vascular, but the substance of the brain itself was not much altered in color or in consistence. The membranes, more particularly around the third nerve of the right side, were thickened and more vascular than natural. On examining the superior surface of the brain, and separating the two hemispheres, they gave way inferiorly, from a softness of the lower part of the middle lobe of both hemispheres, and of a considerable portion of the corpus callosum. The corpora striata were very slightly injected, and softened particularly that of the right side. The lining membrane of the ventricles was not altered in color.

" On dividing the vertebræ, a considerable quantity of fluid blood gushed out, the moment the interior of the canal was reached. It appeared to be perfectly flooded and engorged. The membranes were evidently thickened and highly vascular. The spinal marrow was not altered in appearance, but, if any thing, somewhat softer than natural. The substance of the marrow itself was not injected. The viscera of the thorax presented no appearance of disease.

" The liver was perfectly engorged with blood,—an incision being made through its structure, the blood could be squeezed from it as from a sponge. Its weight was $5\frac{1}{2}$ pounds. The gall bladder

was distended with a quantity of thick, black, bilious matter. The spleen was large, but contained little blood in comparison with the liver.

" The kidneys were congested but otherwise healthy. The intestines contained a quantity of thin greenish matter. There were a few spots of ecchymoses in the lower two-fifths of the ileum. The small intestines contained a few large worms. The alimentary canal was otherwise healthy. The urinary bladder bore no mark of disease."

Notices are made of a paper in the *Gazette des Hôpitaux*, by M. Guersant, jr., on the treatment of croup; of Professor Troussseau's observations on the anatomy of Pneumonia, as it occurs in infants; of a paper by Mr. Crisp, read before the South London Medical Society, on the treatment of pleurisy in infants, in which he presented the results of forty-one post-mortem examinations in children under two years of age; extracts from a report on whooping-cough, by Dr. Bird, in which the use of alum is recommended as a tonic and anti-spasmodic; with several other valuable notices of essays from distinguished members of the profession at home and abroad, rendering the report one of unusual variety and interest.

At one of the meetings of the College, an interesting discussion arose, on the subject of pseudo-membranous laryngitis, by the resolution of a case of that fearful disease, by Dr. C. D. Meigs, in which the operation of tracheotomy was performed at an advanced stage of the malady—as follows:

" A child four years of age becoming affected with difficult and noisy respiration, was placed under the care of a homopathic practitioner; the parents having lost already a child from croup; recognized in this, the same symptoms as were observed in the former case, and suggested to the medical attendant that the child was laboring under that disease, but this he declared was not the case, but rather thought that the attack would turn out to be one of measles. The child, however, grew worse and worse—no eruption appeared upon the skin, and at the end of two weeks, the respiration having become increased in difficulty and attended with a distinct croupy sound, while the voice of the child was nearly extinct, the parents became alarmed and sent for Dr. Meigs. His son, Dr. J. F. Meigs, immediately saw the patient, and found it an advanced stage of genuine membranous croup, attended with symptoms of the most violent character; an extensive deposition

of membranous matter appeared to have taken place, and the case was looked upon as almost hopeless—with the view, however, of affording, if possible, some relief to the extreme difficulty of breathing, the Doctor directed the application of five or six leeches to the throat on each side of the trachea. Dr. C. D. Meigs now saw the child, and considered it to be in the most imminent danger. The croupal symptoms were intense. Upon auscultation, not the slightest respiratory murmur could be detected in any part of the chest, giving the idea of an individual laboring under complete hépatization of both lungs. The air passed into the lungs with the greatest difficulty, the respiratory effort being prolonged to an extent beyond what the Doctor recollects to have ever before witnessed. The child was extremely restless, its head was thrown back upon the spine, and every moment strangulation seemed imminent. A half ounce of powdered alum was directed, and one drachm of it given to the child at intervals of twenty minutes, until emesis was produced, which did not occur until after the fourth dose. This was rather an uncommon occurrence, vomiting being generally produced by a single dose of the alum; it evidently indicated a torpid state of the nervous mass, the result of the great change produced in the blood, in consequence of the imperfect performance of the respiratory function. No nausea or prostration followed the action of the emetic.

Early the next morning found the child laboring under the most distressing difficulty of respiration; the surface, and particularly, the face, lips, and tongue, were of a blue color, and nearly all the symptoms of a state of asphyxia were present. Dr. M. considered that death was inevitable, but still, the operation of tracheotomy, though a forlorn hope, presented itself as the only possible means of relief. This was stated to the parents, who consented that it should be tried; accordingly, at 11 o'clock the operation was performed by Dr. Pancoast. After laying bare the trachea, he divided the second, third and fourth cartilaginous rings; immediately upon opening the trachea, a discharge took place of mucus, mixed with blood and portions of plastic lymph. In forty seconds, the child breathed with great freedom. Instead of inserting a tube in the usual manner, through the opening into the trachea, Dr. Pancoast secured the open state of this, by cutting from the trachea, an elliptical portion of cartilage, thus leaving an oval opening into the tube somewhat larger than that of the two nostrils; while the edges of the incision through the soft parts, were kept asunder by a leaden wire, which passing around the neck, had the hooked ends of its two free extremities inserted on each side of the wound. The next day the child was up and running about. In a few days, the edges of the incision in the neck were brought together, the wound rapidly healed, and the child, within a surprisingly short period, recovered perfectly, without a single disagreeable symptom occurring.

Dr. Parrish related the history of a case of membranous croup of a severe character, and attended with all the symptoms of approaching death, which recently recovered under his care, without an operation for tracheotomy.

The patient was a child of eighteen months old, which was attacked with what was supposed to be an ordinary catarrh, attended with a harsh dry cough. Simple domestic remedies had been administered for several days without effect, before the Doctor was sent for.

When the patient was seen by him, the cough was "croupy," and the breathing obstructed to an alarming extent. On looking into the fauces, the whole back part of the throat was found lined with a thick, tenacious secretion. An emetic of 2 grs. of turpeth mineral was immediately administered, which operated promptly but without relief. Calomel, grs. v, was administered, to be followed by castor oil in a few hours. After the operation of the purgative, there was still no decided relief; the turpeth mineral emetic was continued regularly every four hours, and the calomel in small doses every two hours, for several days; but the disease steadily progressed; no discharge of membrane having been induced; the breathing became more distressing, and finally, the child was unable to cry; the cough was dry and less developed, and the bronchial tubes appeared to be rapidly filling up. At this stage of the complaint, injections of assafoetida and laudanum were given every four hours, solely with the view of assuaging the sufferings of the child, and all other medicines were suspended. The full effect of the opium was induced, and the jactitation and restlessness diminished, though the breathing continued as bad as ever. The child lay upon the pillow with the head thrown back, and was several times supposed to be dying, from the violence of the paroxysms of dyspnoea. The Doctor left late in the evening, with directions to continue the anodyne, expecting to find his patient dead in the morning. On the morning visit, he was surprised to find, that the paroxysms of extreme difficulty of breathing, had been less frequent, and that the child had slept with comparative comfort, though the respiration was still exceedingly laborious. It was found that a discharge of thick yellow mucus had begun to issue from the nostrils during the night, and on examining the throat, it was evident that the membrane lining the fauces was loosening. The bowels had also been freely moved with copious yellow dejections.

This state of things afforded encouragement to resume the use of turpeth mineral, which acted promptly, bringing away large quantities of thick, yellow mucus, to the great relief of the infant, who, from this time, went on improving, and recovered rapidly.

Dr. P. had no expectation of accomplishing any permanent good by the use of the anodyne in this case, believing that the mechanical obstruction of the trachea and bronchial tubes must inevitably destroy life. It becomes a question, however, how far the dyspnoea in cases of membranous croup, may be the result of nervous

spasm, as well as of a mechanical impediment to the passage of air into the lungs. It is evident, that the dyspnoea is, to a certain extent, paroxysmal, and it is also true, that in many cases where death has occurred, the accumulation of membranous deposit in the air passages, as discovered on a post-mortem examination, has not been sufficient to produce strangulation from mere mechanical obstruction. By keeping, therefore, the system under the influence of anti-spasmodics and anodynes, in addition to remedies calculated to arrest the inflammation, may we not gain time, and enable the latter to have their full effect in arresting the disease, and in producing softening of the membranous deposit?

The Doctor believed that in the management of this intractable malady, we have neglected too much the use of this class of remedies. He would also take this occasion to express his satisfaction with the action of turpeth mineral as an emetic in croup. He had used it on several occasions, since it had been so warmly recommended to the College in the communication of Dr. Hubbard, of Maine, and had been highly pleased with it. It acts promptly and powerfully, without leaving behind it the depressing effects of the antimonials.

The emetic may be repeated at short intervals, and continued, as in this case, for many hours, without the risk of alarming depression.

Dr. Jackson, so far from considering such articles as would produce emesis, without causing any direct depression of the vascular action, as those best suited to the treatment of a violent case of croup—would say, that in the first stage of the disease, a depressing effect was to be desired; venesection, even to the extent of inducing fainting, and the free use of tartar emetic, are, in his opinion, at the onset of the disease, our most important remedies. Gentlemen might speculate as much as they pleased about the specific character of the affection of the larynx and trachea, in this disease; he was fully convinced that it was inflammatory, and that the inflammation often extended throughout the whole extent of the trachea, and even into the bronchi; that to reduce promptly the inflammation of these parts, was the best mode of preventing the formation of the pseudo-membranous exudation, and of saving the life of the patient. This conviction was not the result of theory, but of much personal experience. In the second stage of the disease, he was willing to admit, that the turpeth mineral, and similar remedies, which have the effect of producing a discharge of mucus, and probably of facilitating the detachment and expulsion of the pseudo-membranous exudation, without causing any very decided depression, were the remedies demanded, and would often, even under very unfavorable circumstances, produce a marked amelioration of all the more distressing symptoms.

Dr. Page would inquire of those conversant with the morbid pathology of croup, what was usually the extent of the pseudo-membranous exudation; what was its consistence and thickness.

He had presumed from the statements of authors, that the exudation in croup, was a thick, firm, membraniform substance, forming, as it were, a cast of the trachea, and yet, in the only case in which he had an opportunity of examining with care, the condition of the larynx and trachea after death, it occurred only in very thin detached patches, between which there occurred a thick, tenacious, muco-purulent substance, easily scraped off, and having nothing of a membranous appearance. So small was the membrane in extent, he was unable to account for the extreme difficulty of respiration, on the supposition that it was dependent upon the presence of the exudation in the larynx and trachea.

Dr. Condie believed that the description given by Dr. Page, of the appearances detected after death, in the case alluded to by him, would apply to the generality of cases of croup, in which death takes place at an early period of the disease; when death occurs in the second stage, the whole of the mucous surface of the larynx and trachea is often completely covered with a pseudo-membranous exudation, sometimes of considerable firmness. We have numerous accounts of this membraniform exudation being discharged by vomiting—extracted through an opening made into the trachea, during life, or removed from the latter after death, in the form of a tube presenting the shape of the trachea and bronchial divisions; cases of this kind the Doctor believed, however, to be rare. He did not suppose that the paroxysms of intense dyspnoea were produced by the presence alone of the pseudo-membranous exudation, they were evidently dependent upon a spasmodic affection of the glottis.

In regard to treatment, Dr. Condie would place his chief reliance, in cases of genuine croup, upon direct depletion, emetics, and calomel. Although he is convinced that in a very large number of cases, the disease popularly denominated croup in this city, is not pseudo-membranous laryngitis, but either simple acute laryngitis, or sub-acute laryngitis with spasms of the glottis; and it is upon the result of the treatment in this latter affection, that the opinion of very many of our physicians has been formed, in regard to the remedies best adapted for the arrest of genuine croup:—still, his experience has taught him, that in pseudo-membranous croup, as it occurs in this city, blood-letting in the early period of the attack, is an all-important remedy, and that when properly timed, carried to a sufficient extent, and followed by full doses of tartar emetic and calomel, and repeated immersion in the warm bath, it will not unfrequently effect the cure of the disease. The facts that have been recently adduced in favor of the application of a strong solution of nitrate of silver to the larynx, would appear to recommend this means strongly to our notice, as a most important item in the treatment of croup. That, by proper instruments, and a little dexterity, soon acquired by practice, the solution may be applied directly to the larynx, Dr. C. has fully convinced himself.

After the disease has reached its second stage, our chief hopes are to be placed upon such emetics as operate promptly, without producing much nausea or exhaustion, as the alum, the sulphate of mercury, and sulphate of copper. It is probable that the application of the nitrate of silver may still be productive of good effects, particularly if it has not been fully tried in the first stage. Dr. C. however, confesses, that when the disease has reached its second stage, his own experience would lead him to place but little hopes upon the powers of any course of treatment to prevent a fatal termination. It is probable that tracheotomy may occasionally succeed; as in the case related this evening, and in others which have been published, it has certainly saved the life of the patient when performed at an advanced stage of the disease, and apparently under the most unfavorable circumstances. When the particular cases of croup and the period of the disease to which the operation is best adapted, shall be more positively ascertained, it will become, he believed, the means of reducing considerably, the mortality of the disease.

Dr. C. D. Meigs has seen a case of croup in which the false membrane had the form of a hollow tube of the shape and diameter of the trachea, with the bronchial ramifications. He has still in his possession the preparation. The Doctor did not consider that the whole of the difficulty of respiration, and the death from asphyxia were the results solely, of the membraniform deposit upon the surface of the larynx and trachea, though this was often of considerable extent and thickness; there was no doubt, a still greater impediment to the function of respiration, caused by the extensive infiltration of the submucous body and cellular membrane, which he presumes will be found to be present in all severe attacks of the disease.

A Practical Treatise on Poisons, their symptoms, antidotes, and mode of treatment. By O. H. Costill, M. D. Philadelphia, Grigg, Elliot and Co. 1848.

We have received from the publishers this 18mo. volume of 160 pages, arranged in a suitable style for reference, and in all respects adapted to the convenience of the practitioner. The author's preface is a very short explanation of the motives which prompted him to prepare the work, and in the body of the book itself, are plainly stated the results of his own experience in the treatment of poisons, with a judicious compilation of the views of Christison, Beck, Taylor, and others who have written upon toxicology. The various kinds of poisons are classified in three dis-

tinct groups, to wit: irritant poisons, narcotic poisons, and narcotic irritants, and the work is concluded by essays on rabies, the bites of venomous serpents, and the following practical remarks on the treatment of asphyxia from drowning.

" 1st. The body should be stripped of its wet clothing, wiped dry and carefully wrapped in warm blankets; this should be done on the spot if possible, before the body is removed. 2d. It should be taken to the nearest convenient place for resuscitation; in removing the body, care must be taken to avoid lifting the body either by its feet or by the shoulder, to prevent the head falling backwards or forwards on the breast, either of which would be injurious. It should be placed on the back, with the head and shoulders elevated on a door or board, or in a cart. 3d. When arrived at the place prepared for it, it should be placed in a bed previously warmed, the head and shoulders still elevated, and warm bricks, or bottles filled with hot water, should be applied to the feet, the knees, and in the arm-pits, and warm stimulating applications should be made to the epigastrium.

As the great object is to establish respiration, the lungs may be inflated in the following manner: a common bellows should be procured immediately, and the pipe applied to one of the nostrils: one assistant takes charge of the bellows, another should close the opposite nostril and the mouth accurately, a third assistant should press down the upper part of the trachea (in men called the *ponum adamum*, or Adam's apple,) with one hand, while the other should be spread lightly over the chest and stomach. The bellows should now be opened and immediately closed, the nostril should then be suffered to open, and the hand which is resting on the chest should press firmly down so as to make the lungs collapse, and expel the air as completely as possible; this operation should be repeated about fifteen times in a minute, imitating thereby the act of respiration. In cases where a bellows cannot be procured immediately, the mouth of the operator may be applied in its place. In using the bellows, care should be taken not to force more than a moderate quantity of air into the lungs, lest their structure may be injured.

These efforts should be continued from one to three hours; warmth should be assiduously kept up, and stimulating embrocations continued over the epigastrium. A weak preparation of ammonia may be applied occasionally to the nostrils, and it has been proposed to introduce a mixture containing ammonia or wine whey into the stomach, through a stomach tube.

The first symptoms of returning life are convulsive twitches of the muscles about the respiratory organs, giving rise to gasping and sighing, and by degrees those spontaneous actions become more regular, till respiration is established, and the circulation re-

turns. Even then the efforts of the operator must be continued, and the patient diligently watched, as some time must elapse before the vivifying effect of the freshly generated arterial blood can be extended over the system generally, and especially before the functions of the brain are restored.* A case is recorded where death occurred by convulsions after respiration had been established.† It is proper to state here, that a difference of opinion exists as to the propriety of artificial inflation of the lungs, in cases of asphyxia from drowning.

Mr. Taylor, in his *Med. Jurisp.*, p. 405, says, "Mr. Wooley, who has had considerable experience in these matters, denies its efficacy, and states that in cases in which he has been successful in resuscitating the drowned, he has not inflated the lungs." And in the case recorded by Dr. Douglass, *Med. Gazette*, xvii. 663, where recovery took place after the patient had been submerged fourteen minutes, inflation of the lungs was tried, but not persisted in, it not appearing to be of any use. In this case the treatment consisted in the application of warmth and constant friction, continued for eight hours and a half.

In the treatment of persons apparently dead from hanging or any other mode of strangulation, the same means are to be used and persevered in, as have been recommended for the recovery of the drowned. The posture in which the body should be laid, is the same, except that the head should be raised somewhat higher. The fulness of the vessels in this case, may be such as to require bleeding, which will be most effectual if done in the jugular vein; the quantity of blood taken must be merely enough to relieve the vessels, and not so great as to weaken the powers of life. During convalescence, if excessive re-action should occur, it may be necessary to deplete more freely.‡

In those cases of strangulation, arising from foreign bodies in the trachea, the operation of bronchotomy affords the only chance of relief to the patient.§

Asphyxia from carbonic acid, or any other of the irrespirable gasses, is to be treated upon the general principles just adverted to. The first thing to be done is to remove the body from the influence of the noxious gas, and expose it to free, pure air. The temperature of the body in these cases is generally above the natural standard, and effusion of cold water is very advantageous; it acts as a powerful stimulant in consequence of the impression made upon the skin. A moderate bleeding has been recommended. The inhalation of oxygen gas has also been used with advantage.||"

The work is a useful manual, which deserves a place in the library of every physician.

* *Cyclopaedia of Practical Medicine.* † Dr. Parry's Life of Sir H. Davy, 4to ed. p. 69. ‡ *Cyclopaedia of Practical Medicine.* § *Ibid.* || *Ibid.*

to any other and giving it to all the papers in the city and during
the first month, the New Jersey Medical Society has given to various papers
in the city to be exchanged with them, during which month and others

NEW JERSEY MEDICAL REPORTER.

BURLINGTON, TENTH MONTH, (OCTOBER,) 1845.

OUR SECOND VOLUME.

The present number commences the second number of the Reporter. Believing that the interest and value of a medical journal depends greatly on the amount and character of the original matter which it contains, it has been our aim to give a practical value to the work, by a variety of excellent papers furnished by the Transactions of the New Jersey Medical Society, and by the labors of individual correspondents. We are thankful for the aid that has been furnished by our friends hitherto, and now, in beginning another term of service, invite their continued co-operation.

BIBLIOGRAPHICAL DEPARTMENT.

The large space in the present number, occupied by the interesting biography of Dr. Hendry, has prevented a notice in the Bibliographical Department of several pamphlets that have been received; among which are the annual announcements for the current year of the University of Pennsylvania, the Philadelphia College of Medicine, the Pennsylvania Medical College, and the Indiana Medical College, with a valedictory Address delivered to the Medical Class of the latter, by A. B. Shipman, M. D., their Professor of the Principles and Practice of Surgery. The Address contains much wholesome advice, and deserves a more extended notice than we are able to give it.

SANITARY REFORM.

One of the hopeful aspects of the present times, is the attention which is now being paid to the question of sanitary reform. In England, and on the Continent, a vast amount of talent and re-

search has been recently expended in investigating the sources of disease, especially in large and thickly populated towns; and the results, thus far have clearly proved, that thousands of premature deaths occur, dependent upon removable causes; and that under wise municipal regulations, the average duration of human life might be greatly increased.

It has been estimated by some of the prominent friends of sanitary reform in England, that there is an annual sacrifice of life in England and Wales of thirty-five thousand, and in the United Kingdom of upwards of sixty thousand—that is, taking two per cent. per annum, as the natural standard of mortality in these countries, the excess of deaths dependant upon causes supposed to be removable, amounts to the number stated.

The simple statement of this fact is enough to excite the earnest attention of every intelligent and philanthropic mind, to look into this question as it may affect other localities; and to induce prompt action in the furtherance of measures having a tendency to diminish disease and death. There is certainly no function of government so exalted as that which tends to the prolongation of life, and the prevention of disease amongst the people; and yet in this country, at least, how little has been done by legislative assemblies for this object. The question of sanitary reform has not yet been agitated; and it depends mainly upon the action of the medical profession, how long its consideration shall be delayed. We are rejoiced to find that the American Medical Association has already taken measures to bring this question before the people. At the first meeting of the Association, held in New York, in 1846, a committee was appointed to consider the expediency of urging upon the State Governments the adoption of measures for the registration of the births, marriages and deaths of their several populations. At the next meeting, in 1847, this committee urged upon the State Medical Societies, the propriety of soliciting legislatures to pass a law securing this object, and acting upon this recommendation, several States, amongst which is New Jersey, have already promptly responded to the call, thus made upon them.

This is the first step in the movement, and must form the basis for future action—a correct statistical account upon these points,

being absolutely essential to the prosecution of enquiries upon matters affecting health and life.

At the last meeting of the Association, held at Baltimore, another important move was taken upon the sanitary question, by the appointment of a committee on Public Hygiene, charged with the duty of reporting to the Association next year upon a variety of subjects closely affecting the health of the inhabitants, more especially of cities and large towns.

We have received the circular of this committee, which indicates the topics to which they propose to direct their enquiries—It is as follows:

American Medical Association, Committee on Public Hygiene, May, 1848.

At the Annual Convention of the American Medical Association held in Baltimore, in May, 1848, the following gentlemen were appointed a committee on Public Hygiene.

Drs. James Wynne, Baltimore; Charles G. Gage, Concord, N. H.; John M. Thomas, Washington, D. C.; Isaac Parrish, Philadelphia; P. C. Galliard, Charleston, S. C.; L. P. Yandell, Louisville, Ky.; J. T. Harrison, Cincinnati, Ohio; Albert Smith, Peterborough, N. H.; J. Curtis, Lowell, Mass.; Edward Barton, New Orleans; John H. Griscom, New York; E. D. Fenner, New Orleans.

It is the purpose of this committee to make a sanitary report, embracing the principal cities in the United States, and with a view of facilitating their enquiries, you will greatly oblige by furnishing the member of the committee who requests the information of you, with answers to the following questions:

1. What is the population of the town, and its position in relation to the surrounding country; what the geological formation of the country, the nature of its surface and subsoil, and the means of, or impediments to drainage, more especially within the town limits?

2. What is the character of the town in reference to health; what is the condition of its most unhealthy and crowded parts, where disease is supposed to be most prevalent, and to what causes are such diseases mainly attributable?

3. What are the arrangements for drainage? Is there a public survey of levels; are the streets and alleys paved and laid out with a proper inclination for surface drainage, or are they defective in these particulars; is the drainage effected by sewers or surface drainage, and is the mode adopted, effective?

4. What is the mode and expense of cleansing the streets; are the courts and alleys occupied by the poor, cleaned, and how often; where is the refuse from the houses deposited, and where is the street manure kept, and how disposed of?

5. What is the condition of the more densely populated parts of the town in respect to ventilation? Are the streets wide or narrow? Are courts and alleys built up, and closed at the end, and what is the character of the houses of the poor? What number of families occupy one house; how many persons live in one room, and what provision for ventilation? How are the houses warmed in winter?

6. What is the system of public schools, and its influence on health? At what ages are children received into them? What is the size of room, the number of occupants, time allotted to instruction, means afforded for exercise in the open air, and length of summer vacation?

7. What hospitals and dispensaries? How are the public buildings ventilated, as churches, &c., and what provision for public grounds or squares?

8. From what source is the town supplied with water? What are its qualities, and is it abundant?

9. Are the municipal regulations on the above subjects effective or not?

By order of the Committee,

JAMES WYNNE, Chairman.

It will be perceived that these enquiries have reference to the sanitary condition of the large cities of the union, and if thoroughly prosecuted by the gentlemen to whom the duty is entrusted, we may anticipate a highly valuable report in regard to these important localities.

But the question of sanitary reform has a much wider scope than is here laid down. In the rural districts of our widely extended territory, there are many causes of disease not yet discovered, and many more obvious, which by proper regulations might be removed or prevented.

To investigate these, and to enlighten and stimulate the public authorities in regard to their removal, is one of the highest duties of our profession.

It seems to us, that no more appropriate or benificent duty could engage the attention of state and district medical societies, than this.

The enlightened physician will not only seek to arrest the course of disease, and ward off the stroke of death, but by searching out its causes, to prevent its attacks. For, however our profession may be charged by the ignorant and censorious, with pursuing selfish ends, its whole history will amply vindicate its claim to

the rank of a humane and liberal calling; and in nothing is this character more strikingly illustrated than in the present gigantic efforts which are making, more especially in Great Britain, to carry forward measures having for their object the prevention of disease, and the prolongation of life.

That our country will not be behind-hand in this noble work, we feel assured, from the commencement which we have already made.

ITEMS.

The New York Journal of Medicine comes to us in a new costume. Dr. Charles H. Lee has retired from its editorial charge, and his place is supplied by S. S. Purple, M. D.

University of Pennsylvania.—"It is proposed by the Faculty to open the regular session of 1848-49, upon Monday, the 16th of October, and to continue lectures as usual; the early part of October being occupied by a series of preliminary lectures, in which all the Professors will participate.. Should the step in advance, by the University of Pennsylvania, be followed by other schools, it is the intention of the Faculty to extend the regular session to the period of six months, so as fully to meet in this respect, the views of the Medical Convention."—[Report of the Medical Department of the University of Pennsylvania, for the year 1848, to the Alumni of the school.]

Extension of Lecture terms.—The College of Physicians and Surgeons of New York; the Buffalo Medical College; the Medical College of South Carolina; the Medical College of Georgia; the Medical College of Louisville, and the Franklin College of Philadelphia, have all announced their intention of extending their ensuing sessions.

National Medical Association.—We have learned that the proceedings of the last meeting held in Baltimore, are nearly ready to be supplied in pamphlet form. We regret that they have been delayed too long for notice in the present number of the Reporter.

Pennsylvania Hospital.—During the lecture term of 1847-48, a larger number of students were in attendance upon the Clinical lectures at the Hospital, than upon any other occasion since the foundation of the Institution.